SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

			1	T	. ,					
SIZE ROBERT J.			2. Date of Event Requiring Stater (Month/Day/Yea 01/01/2007	nent 1	3. Issuer Name and Ticker or Trading Symbol <u>DENTSPLY INTERNATIONAL INC /DE/</u> [(XRAY)]					
(Last) (First) (Middle) 30859 EDGEWATER DRIVE					4. Relationship of Reporting Person(s) to (Check all applicable) Director 10% X Officer (give title Other below) belo		er 📕	 5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Linc) 		
(Street) LEWES			_		Senior Vice Presider			Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)								
			Table I - Nor	n-Derivati	ve Securities Beneficial	ly Owned				
1. Title of Security (Instr. 4)					Amount of Securities eneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
					Securities Beneficially nts, options, convertible		s)			
1. Title of Derivative Security (Instr. 4)			2. Date Exerc Expiration Da (Month/Day/)	ate	Underlying Derivative Security (Instr. 4)		4. Convers or Exer	cise Form:	6. Nature of Indirect Beneficial Ownershij (Instr. 5)	
			Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivati Security	ve or Indirect		
Phantom Sto	ock (2004-05 S	GERP)			Title Common Stock	or Number of	Derivati	ve or Indirect		
		SERP)	Exercisable	Date		or Number of Shares	Derivati Security	ve or Indirect (I) (Instr. 5)		
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Explanation of Responses:

1. Value paid in stock upon retirement

2. Not applicable to this transaction.

Remarks:

<u>By: Brian M. Addison,</u> <u>Esquire, POA for</u>

01/04/2007

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.