FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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Check this box if no longer subject	5
to Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response:	0.5						

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. Name and Address of Reporting Person* HOSEIN CLYDE					2. Issuer Name and Ticker or Trading Symbol DENTSPLY SIRONA Inc. [XRAY]							(Chec	Relationship of Reporting Person(s) to Issue (Check all applicable) X Director 10% Owner						
(Last)	(F	irst) (I	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 04/12/2024							Office below	r (give title		Other (s below)	specify		
C/O DENTSPLY SIRONA INC 13320 BALLANTYNE CORPORATE PLACE				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person							
(Street) CHARLOTTE NC 28277												Form filed by More than One Reporting Person							
(City)	(S		Zip)			Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.							nded to						
		Table	I - No	n-Deriva	ative S	Secu	rities	Acq	uired,	, Dis	posed of	, or E	Bene	ficiall	y Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date)				Executi		ution I	Date,			es Acquired (A) o Of (D) (Instr. 3, 4 a			5. Amo Securit Benefic Owned Reporte	es ially Following	6. Owne Form: D (D) or Ir (I) (Instr	Direct direct (7. Nature of Indirect Beneficial Ownership		
									Code	V Amount		(A) (D)	or I	Price	Transac	action(s) 3 and 4)			(Instr. 4)
Common	Stock			04/12/	2024			A		26.426(1	A \$0		\$ <mark>0</mark>	18,286.7955		D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, or Exercise (Month/Day/Year)		Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Disport (D	r osed) r. 3, 4	6. Date Exercisa Expiration Date (Month/Day/Year		ite	Amount of		De Se (In	Price of crivative curity estr. 5)	derivative Securities		vnership rm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code	v	(A)	(D)	Date Expiration Exercisable Date Tit		Title	Amo or Num of Shar	ber								

Explanation of Responses:

1. Represents dividends on restricted stock units (RSUs) awarded to the Reporting Person in the form of additional RSUs and are subject to the same vesting terms as the underlying awards. The dividends vest simultaneously with the RSUs to which they relate. Each RSU converts to common stock on a 1:1 basis.

Dane Baumgardner, Attorney-In-Fact for Clyde R. Hosein

** Signature of Reporting Person

04/15/2024 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 4 (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.