FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| | | | | | | | () - | | | | , , , | | | | | | | | |
|--|---|---|--|---------|---|---|---|-----|--|-----------|--|---|---|--|------------------------|--|--|---|--|
| | nd Address of MER HA | | 2. Issuer Name and Ticker or Trading Symbol DENTSPLY SIRONA Inc. [XRAY] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | | |
| KRAE | - | DELITED ON OTHER [MAIL] | | | | | | | | X Directo | r | 10% Owner | | ner | | | | | |
| (Last) (First) (Middle) | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/14/2017 | | | | | | | | Officer below) | (give title | | Other (sp below) | ecify | |
| 221 WES | 04 | U4/14/201/ | | | | | | | | | | | | | | | | | |
| SUITE 60W | | | | | | If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Individual or Joint/Group Filing (Check Applicable | | | | | |
| | - | 4. If Americanone, Date of Original Flied (Month Day) Teal) | | | | | | | | Line) | | | | | | | | | |
| (Street) | | | | | | | | | | | | | | X Form f | led by One | Reportir | ng Person | | |
| YORK PA | | 17405 | | | | | | | | | | Form filed by More than One Reporting Person | | | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | | |
| | | Tab | ole I - Nor | n-Deriv | vativ | e Se | curities | Acq | juired, D | isp | osed of | f, or Ber | neficial | ly Owned | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | ear) E | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Code (Instr. 5 | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | 5. Amour Securitie Beneficia Owned F Reported | s ally following | 6. Owne Form: D (D) or In (I) (Instr. | oirect Ir direct B . 4) C | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | Code | , | Amount | (A) or (D) | Price | Transact (Instr. 3 a | ction(s) | | " | nsır. 4) | |
| 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transaction Code (Instr. 8) | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) | y Di or (I) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | | Date Exercisable | | Expiration Date | Title | Amount or Number of Shares | | (Instr. 4) | (3) | | | |
| RSU (Restricted Stock Unit) | \$0 ⁽¹⁾ | 04/14/2017 | | | A | | 6.495 ⁽¹⁾ | | (1) | | (1) | Common Stock | 6.495 | \$0 | 1,247.84 | 8 | D | | |

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.

Michael Friedlander, Attorney-

In-Fact for Harry M. Jansen

04/18/2017

Kraemer, Jr.

** 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 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.