FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|------------|---------------|-----------|

| OMB APPROVAL | | | | | | | |
|---------------------|-----------|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | |
| Estimated average b | ourden | | | | | | |
| hours per response: | 0.5 | | | | | | |

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

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* LUNGER FRANCIS J (Last) (First) (Middle) EIGHT BASSWOOD LANE (Street) ANDOVER MA 01810 | | | | | 2. Issuer Name and Ticker or Trading Symbol DENTSPLY INTERNATIONAL INC /DE/ [(XRAY)] 3. Date of Earliest Transaction (Month/Day/Year) 06/23/2006 4. If Amendment, Date of Original Filed (Month/Day/Year) 06/27/2006 | | | | | | | 6. In Line | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Officer (give title below) below) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | |
|--|--|--------------------------------------|--------------------------------|---------|--|------|---------|--|--|---|--|---|---|---------------------|--|---------------------------------------|---|--|
| (City) | (State |) (Zip | D) | | | | | | | | | | | Person | | | | |
| | | Table | l - Nor | n-Deriv | ative | Secu | urities | Acqı | uired, | Dis | osed of | or Ben | eficially | Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Trans: Date (Month/I | | | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) of (D) (Instr. 3, 4) | | | (A) or . 3, 4 and 5 | 5. Amoun Securities Beneficial Owned Fo | Form (D) o | | : Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |
| | | | | | | | Code | v | Amount | (A) or (D) | Price | Transaction (Instr. 3 au | | | | | | |
| | 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 | | ise (Month/Day/Year) if any (Month/I | n Date, Transacti Code (Ins | | | | | 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 derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | e s ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | |
| | | | | Code V | | (A) | (D) | Date Exercisable | | Expiration Date | Amour or Numbe of Title Shares | | | | | | | |
| Phantom Stock (2Q2006 Deferred Compensation) | \$30.14 | 06/23/2006 | | | A | | 232.63 | | (1) | | (1) | Common Stock | 232.63 | \$60.27 | 232.6 | 63 | D | |

Explanation of Responses:

1. Value paid in stock upon retirement

Remarks:

By: Brian M. Addison, Esquire,

POA for

<u>06/27/2006</u>

** 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.