FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP 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

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

1. Name and Address of Reporting Person* WISE BRET W					2. Issuer Name and Ticker or Trading Symbol DENTSPLY INTERNATIONAL INC /DE/ (XRAY)						<u>/</u> [(Che	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) 704 GO	(F OSE NECK	irst) DRIVE	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/20/2007				ar)		X	below)	or (give title Other (specify below) RMAN, CEO & PRESIDENT			· · ·	
(Street) LITITZ (City)	P.	A tate)	17543 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)				6. Inc Line)	Form file	al or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson						
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
Date		2. Transac Date (Month/Da	Execution Date,		Code (Instr.				and 5) Securities Beneficially Owned Following		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
							Code	V Amo	ount	(A) or (D)	Price	Transaction	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
			Table II - I			curities Ils, warr		-	-	-		-	Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date if any (Month/Day/Yea	ate, Transaction Code (Instr.		Derivative		Expiration Date (Month/Day/Year)		of Ur	7. Title and Amo of Securities Underlying Deriv Security (Instr. 3 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficial Owned Following Reported	re Oves For ally Or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	e V	(A)		Date Exercisable	Expirate Date	ion Tit		Amount or Number of Shares		Transaction(s) (Instr. 4)			
Phantom Stock	(1)	03/20/2007		A		2,900.95		(1)	(1)	Co	ommon	2,900.95	\$29.85	2,900.	.95	D	

Explanation of Responses:

1. Value paid in stock upon retirement

Remarks:

SERP)

By: Brian M. Addison, Esquire, POA for

04/11/2007

** 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 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.