FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPR	ROVAL
OMB Number:	3235-0287
Estimated average bu	ırden

# 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 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

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Name and Address of Reporting Person*     SIZE ROBERT J.						2. Issuer Name and Ticker or Trading Symbol DENTSPLY INTERNATIONAL INC /DE/											5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
					1-	[(XRAY)]										Direc		***	10% O	· I		
																	Officer (give title below)		Other ( below)	specity		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year)											Senior Vice President					
30859 EDGEWATER DRIVE				02/	02/05/2007																	
					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable						
(Street)	_	_	400=0												Line	,	£1 1 l	O D	ti D	_		
LEWES	D.	E	19958														,		orting Perso			
																Form Pers		More tha	n One Repo	rting		
(City)	(S	tate)	(Zip)																			
		Tab	le I - Nor	n-Deriv	ative	e Sec	curitie	s Ac	quir	ed, D	isp	osed o	f, or	Ben	eficial	ly Owne	d					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						ar)   E	2A. Deemed Execution Date, if any (Month/Day/Yea		r, Transaction Disp Code (Instr. 5)		Disposed	urities Acquired (A) sed Of (D) (Instr. 3,			Securi Benefi Owned	eficially ned Following		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
										ode V		Amount	(A) or (D)		Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
		7	Гable II -									sed of, onvertil				Owned		,	,			
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)				Expira	6. Date Exercisable a Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Seci (Instr. 3 and 4)		Security	8. Price of Derivativ Security (Instr. 5)	deriva Secur Benef Owne Follow Report	rities ficially ed wing rted saction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerc	sable		xpiration vate	Title		Amount or Number of Shares							
Restricted Stock Unit	(1)	02/05/2007			Α		4,850		02/05/	2010 <sup>(2)</sup>	T	(1)		mon ock	4,850	\$30.76	4	1,850	D			

### **Explanation of Responses:**

- 1. Not applicable to this transaction.
- 2. Vests in full (restrictions lapse) 3 years from date of grant  $\frac{1}{2}$

## Remarks:

By: Brian M. Addison, Esquire, 02/14/2007 POA for

\*\* 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.