SEC	Form 4
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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 burden							
hours per response:	0.5						

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See											IEFICIA		NERS	HIP	Estim	Numbe ated av per res	erage burden	0.5	
Instruction				File	d pursu or S	ant to ection	Section 1 30(h) of	.6(a) the In	of the Se vestmer	ecuritient Con	es Exchange npany Act of	e Act of 193 1940	34			per 185		0.5	
1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol DENTSPLY INTERNATIONAL INC /DE/									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
JONES LESLIE A						(XRAY)]								X Director			10% Ow		
(Last) (First) (Middle)														Officer (give title Other (specify below) below)			becity		
ASHLAR HOUSE						3. Date of Earliest Transaction (Month/Day/Year) 06/23/2006													
1921 STRA	WBERRY I	FIELDS										6.10							
(Street)	(Street)					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
YORK	PA	17									X Form filed by One Reporting Person Form filed by More than One Reporting				ing				
,														Person	ed by Mor	e man	One Report	ing	
(City)	(State	e) (Zij	p)																
		Table	e I - Nor	n-Deriv	ative	Secu	irities /	Acq	uired,	Disp	posed of,	or Ben	eficially	Owned					
1. Title of Security (Instr. 3) Date (Month/L					Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquir Disposed Of (D) (Ins) Securities Beneficial	Securities Beneficially Owned Following		Direct II Indirect E str. 4) C	7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)	Price	Transactio (Instr. 3 ar				Instr. 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)	erivative ecurity or Exercise (Month/Day/Year) Execution Date, if any			n Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title an of Securit Underlyin Derivative (Instr. 3 an	ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(1)	Date Exercis	abla	Expiration Date	Title	Amount or Number of Shares						

(1)

(1)

Common

Stock

Explanation of Responses:

1. Value paid in stock upon retirement

\$60.27

Remarks:

Phantom Stock (2Q2006 Deferred

Compensation)

By: Brian M. Addison, Esquire, 06/27/2006 POA for

** Signature of Reporting Person

281.11

\$60.27

281.11

Date

D

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 \ast If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

06/23/2006

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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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.

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