FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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on, D.C. 20	549		OMB APPR

	OMB APPROVAL									
	OMB Number:	3235-0287								
ı	Estimated average burden									
ı	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).

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

Name and Address of Reporting Person* SIZE ROBERT J.					2. Issuer Name and Ticker or Trading Symbol DENTSPLY INTERNATIONAL INC /DE/ [XRAY]									k all applical	tionship of Reporting all applicable) Director Officer (give title		n(s) to Issue 10% Ow Other (s	wner
(Last) (First) (Middle) 221 WEST PHILADELPHIA STREET					3. Date of Earliest Transaction (Month/Day/Year)							- X	X Officer (give title Officer) below) below) Senior Vice President				poony	
WEST B	UILDING/	DENTSPLY			02/04	/201	1											
(Street) YORK PA 17405					4. If Amendment, Date of Original Filed (Month/Day/Year) 02/08/2011							Line)	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	State)	(Zip)										. James and the reporting relation					
		7	able I - Non-	Deriva	tive \$	Seci	urities Ac	quired,	Dis	posed of	, or Be	nefi	cially (Owned				
Date			2. Transaction Date (Month/Day/Year)		Exe if a	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Disp		4. Securition Disposed	ecurities Acquired (A) o posed Of (D) (Instr. 3, 4 a		or 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) (D)	or	Price	Transactio (Instr. 3 an				inisu. 4)
Common Stock 02/0				02/04/2	1/2011		М		4,269.9	9 A		\$36.4	4,269.99			D		
Common Stock 02/				02/04/2	04/2011			F		1,828 ⁽⁴⁾ D S		\$36.4	2,441	2,441.99		D		
			Table II - D				rities Acqu warrants							wned				
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)	Code (Instr.		Deri Sec Acq Disi	lumber of ivative :urities juired (A) or posed of (D) :tr. 3, 4 and	Expiration	6. Date Exercisable a Expiration Date (Month/Day/Year)		7. Title and Am of Securities Underlying Der Security (Instr. 4)		erivative	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Followin Reported	vative urities eficially ned owing	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	e V (A)		Date Exercisa	ble	Expiration Date	Title	Nι	nount or ımber of nares		(Instr. 4)				
Restricted Stock Unit	\$36.4	02/04/2011		M			4,269.99 ⁽³⁾	02/04/20	11 ⁽²⁾	02/04/2011	Commo	4,	269.99	\$0 ⁽¹⁾	15,979).85	D	

Explanation of Responses:

- 1. Not applicable to this transaction
- 2. Vests in full (restrictions lapse) 3 years from the date of grant $\,$
- 3. Vesting of RSU granted on 02/04/2008 (previously reported on Form 4) along with accumulated dividends (issued on a quarterly basis) also reported on Form 4 since the date of the grant.
- 4. Amount withheld for taxes

Deborah M. Rasin, POA for Robert J. Size

02/14/2012

** 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.