FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL						
OMB Number:	3235-0287						
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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*  HECHT WILLIAM F						2. Issuer Name and Ticker or Trading Symbol DENTSPLY INTERNATIONAL INC /DE/ [ (XRAY)]								ck all applica Director	r		on(s) to Issu 10% Ov Other (s	ner
(Last) (First) (Middle) 3920 RAVENSWOOD ROAD						3. Date of Earliest Transaction (Month/Day/Year) 12/23/2004								Officer (give title below)		below)		респу
(Street)  ALLENTOWN PA 181039661  (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	ndividual or Joint/Group Filing (Check Applicable a)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table	e I - Nor	ı-Deriv	ative	Secu	ırities	Acq	uired, [	Disp	osed of,	or Ben	eficially	Owned				
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				5. Amoun Securities Beneficial Owned Fo	For lly (D) ollowing (I) (I		Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Transaction (Instr. 3 and	on(s)			(Instr. 4)
		Та									sed of, o			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transa Code ( 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		te	7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficial Owned Following Reported Transacti (Instr. 4)	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amount or Number of Shares					
Phantom Stock (4Q2004 Deferred Compensation)	\$55.42	12/23/2004			A		193.97		(1)		(1)	Common Stock	193.97	\$0	193.9	97	D	

## Explanation of Responses:

1. Value paid in stock upon retirement

By: Brian M. Addison, Esquire, POA for

12/28/2004

\*\* 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.