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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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

1. Name and Address of Reporting Person* 2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting Person(s) to Issuer WARADY TIMOTHY DENTSPLY INTERNATIONAL INC /DE/ 5. Relationship of Reporting Person(s) to Issuer (Last) (First) (Middle) 2247 SPANGLER CIRCLE 3. Date of Earliest Transaction (Month/Day/Year) 04/07/2008 (Street) YORK PA 17402 (City) (State) (Zip)				animating Committing Associated Dispessed of an Depof	
WARADY TIMOTHY DENTSPLY INTERNATIONAL INC /DE/ (Check all applicable) Check all applicable) ULast) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) Officer (give title Other (specify below) 2247 SPANGLER CIRCLE 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable)	(City)	(State)	(Zip)		, , , , , , , , , , , , , , , , , , , ,
WARADY TIMOTHY DENTSPLY INTERNATIONAL INC /DE/ (Check all applicable) Check all applicable) (Last) (First) (Middle) 2247 SPANGLER CIRCLE 3. Date of Earliest Transaction (Month/Day/Year) Officer (give title below) Other (specify below) VICE PRESIDENT AND CONTROLLER VICE PRESIDENT AND CONTROLLER	. ,	PA	17402	4. If Amendment, Date of Original Filed (Month/Day/Year)	Line) X Form filed by One Reporting Person
WARADY TIMOTHY DENTSPLY INTERNATIONAL INC /DE/ (Check all applicable) Director 10% Owner [(XRAY)] Director 10% Owner X Officer (give title below) Other (specify below)			(Middle)	04/07/2008	VICE PRESIDENT AND CONTROLLER
		1 8	Person*	DENTSPLY INTERNATIONAL INC /DE/	(Check all applicable) Director 10% Owner X Officer (give title Other (specify

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	Date (Month/Day/Year)	if any			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			Securities Beneficially Owned Following	(D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		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)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Additional RSUs ⁽¹⁾	(2)	04/07/2008		A		3.44		(2)	(2)	Common Stock	3.44	\$39.71	10.2	D	

Explanation of Responses:

1. Dividend on existing vested or unvested Restricted Stock Units (RSUs) awarded to participant, payable as additional units of phantom stock

2. Not applicable to this transaction.

Remarks:

<u>By: Brian M. Addison,</u> <u>Esquire, POA for</u>

04/09/2008

** 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.