FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPROVAL
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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 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

1. Name and Address of Reporting Person* <u>CLARK CHRISTOPHER T</u>						2. Issuer Name and Ticker or Trading Symbol DENTSPLY INTERNATIONAL INC /DE/ [ (XRAY)]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title Other (specify					
(Last) (First) (Middle) 1745 WYNDHAM DRIVE SOUTH					3. Date of Earliest Transaction (Month/Day/Year) 02/04/2008									X Office (give title Office (specify below)  EXECUTIVE VICE PRESIDENT & COO					
(Street) YORK PA (City) (State)		17403 (Zip)		4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Tal	ole I - Nor	n-Deriv	/ativ	e Se	curities	s Ac	quired, D	isp	osed o	f, or Ber	neficia	ly Owne	d				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Execution Date			Code (In: 8)	Instr. 5)			tr. 3, 4 and	d Securities F Beneficially (I		Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									uired, Dis					/ Owned	-	<u> </u>			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution E if any (Month/Day	Date, T	1. Transa Code (1 3)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price c Derivativ Security (Instr. 5)		e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				c	Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amount or Number of Shares						
Restricted Stock Unit	(1)	02/04/2008			A		10,011		02/04/2011 <sup>(2</sup>	!)	(1)	Common	10,011	\$41.13	10,01	1	D		

## Explanation of Responses:

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

# Remarks:

By: Brian M. Addison, Esquire, POA for

02/14/2008

\*\* 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.