FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549	
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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).	

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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*     Wenzel Ilse Dorothea					2. Issuer Name and Ticker or Trading Symbol DENTSPLY SIRONA Inc. [ XRAY ]									(Ch	eck all app	tionship of Reporting Pe all applicable) Director		erson(s) to Issuer 10% Owner	
(Last)	(F	rst) (I	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 10/13/2023										Office belov	er (give title v)		Other (s below)	specify
C/O DENTSPLY SIRONA INC 13320 BALLANTYNE CORPORATE PLACE					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicate)  X Form filed by One Reporting Person				.
(Street) CHARLOTTE NC 28277				D											Form filed by More than One Reporting Person				
(City) (State) (Zip)						Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Table	I - Noi	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or	Ben	eficia	lly Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Exec if an	Deemed cution Date, y nth/Day/Year)		3. 4. Securi Transaction Disposed Code (Instr. 5)		Disposed (	es Acquired (A) Of (D) (Instr. 3,		(A) or 3, 4 and	d Securit Benefic Owned	5. Amount of Securities Beneficially Owned Following		Direct Indirect tr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A (D	() or ()	Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common Stock 10/13/2					2023				A		48.731(1	1) A		\$ <mark>0</mark>	11,9	39.072	D		
	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)	tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any				Transaction Code (Instr.		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 and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y Di or (I)	o. wnership orm: irect (D) r Indirect I (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V		(A)	(D)	Date Exercisable		Expiration Date	Title	or Nur of	ount mber ires					

## **Explanation of Responses:**

1. Represents dividends on restricted stock units (RSUs) awarded to the Reporting Person in the form of additional RSUs and are subject to the same vesting terms as the underlying awards. The dividends vest simultaneously with the RSUs to which they relate. Each RSU converts to common stock on a 1:1 basis.

/s/ Dane Baumgardner,

10/16/2023 Attorney-in-Fact for Ilse

Dorothea Wenzel

\*\* 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.