

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL	
OMB Number:	3235-0287
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1. Name and Address of Reporting Person* <u>Deese Willie A</u> (Last) (First) (Middle) 221 WEST PHILADELPHIA STREET SUITE 60W (Street) YORK PA 17401 (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>DENTSPLY SIRONA Inc. [XRAY]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) 05/20/2017	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	

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

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	05/20/2017		M		1,441	A	\$0	4,373	D	
Common Stock	05/21/2017		M		1,412	A	\$0	5,785	D	
Common Stock	05/22/2017		M		1,601	A	\$0	7,386	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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		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 (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				
RSU (Restricted Stock Unit)	\$0 ⁽¹⁾	05/20/2017		M			1,441 ⁽²⁾	(3)	(3)	Common Stock	1,441	\$0	4,235.015	D	
RSU (Restricted Stock Unit)	\$0 ⁽¹⁾	05/21/2017		M			1,412 ⁽⁴⁾	(5)	(5)	Common Stock	1,412	\$0	2,823.015	D	
RSU (Restricted Stock Unit)	\$0 ⁽¹⁾	05/22/2017		M			1,601 ⁽⁶⁾	(5)	(5)	Common Stock	1,601	\$0	1,222.015	D	

Explanation of Responses:

- Restricted Stock Units (RSUs) convert into Common Stock on a one-for-one basis for no additional consideration.
- Comprised of one thousand four hundred twenty-six (1,426) vested RSUs plus fifteen (15) RSUs accrued through dividend equivalent rights, each as previously reported in this Table II.
- Restricted Stock Units vest in full one year from date of grant.
- Comprised of one thousand three hundred ninety (1,390) vested RSUs plus twenty-two (22) RSUs accrued through dividend equivalent rights, each as previously reported in this Table II.
- Restricted Stock Units vest in full three (3) years from date of grant.
- Comprised of one thousand five hundred sixty-seven (1,567) vested RSUs plus thirty-four (34) RSUs accrued through dividend equivalent rights, each as previously reported in this Table II.

Michael Friedlander, Attorney- 05/23/2017
In-Fact for Willie A. Deese

** 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.