DENTSPLY SIRONA Inc.

Form 4/A October 28, 2016

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

January 31, 2005

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if no longer subject to Section 16. Form 4 or Form 5 obligations

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

(Print or Type Responses)

1(b).

Stock

1. Name and A Deese Willi	Address of Reporting P e A	erson * 2. Issuer Symbol	2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
			DENTSPLY SIRONA Inc. [XRAY]								
(Last)	(First) (M	iddle) 3. Date of	Earliest Tra	ansaction							
		(Month/D	ay/Year)				Director		6 Owner		
221 WEST	05/23/20	05/23/2016				Officer (giv		er (specify			
STREET, S	UITE 60W						below)	below)			
	(Street)	4. If Amer	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
		Filed(Mon	Filed(Month/Day/Year)					Applicable Line)			
		05/24/20	05/24/2016				_X_ Form filed by One Reporting Person				
YORK, PA	17401						Form filed by Person	More than One Ro	eporting		
(City)	(State)	Zip) Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed	of, or Beneficia	lly Owned		
1.Title of	2. Transaction Date	2A. Deemed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Execution Date, if	te, if TransactionAcquired (A) or				Securities	Form: Direct	Indirect		
(Instr. 3)		any	Code	Disposed			Beneficially	(D) or	Beneficial		
		(Month/Day/Year)	(Instr. 8)	(Instr. 3, 4 and 5)			Owned	Indirect (I)	Ownership		
							Following	(Instr. 4)	(Instr. 4)		
					(A)		Reported				
					or		Transaction(s) (Instr. 3 and 4)				
			Code V	Amount	(D)	Price	(IIIsu. 3 aliu 4)				
Common	05/23/2016		M	1,748	A	\$0	2,932	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

(1)(2)

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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. Transacti Code (Instr. 8)	5. Number on 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 Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Common Stock	<u>(2)</u>	05/23/2016		M	1,748 (1) (2)	05/23/2016	05/23/2016	Common Stock	1,748

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

Deese Willie A 221 WEST PHILADELPHIA STREET SUITE 60W YORK, PA 17401

Signatures

Michael Friedlander, Attorney-In-Fact for Willie A.

Deese
10/28/2016

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).
- (1) This amended Form 4 is filed solely for the purpose of reporting an aggregate of two (2) additional shares of common stock which were accrued through dividend equivalent rights (DERs) and not reported on the original Form 4.
- (2) Comprised of one thousand seven hundred ten (1,710) vested Restricted Stock Units (RSUs) plus thirty-eight (38) DERs. The original Form 4 reported all RSUs and thirty-six (36) DERs. RSUs convert into common stock on a 1:1 basis for no additional consideration.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners 2