Rasin Deborah Form 4 July 13, 2012

FORM 4

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

OMB APPROVAL OMB

3235-0287 Number: January 31,

Expires: 2005 Estimated average

10% Owner

Other (specify

0.5

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Check this box if no longer subject to Section 16. Form 4 or Form 5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

obligations may continue. See Instruction

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 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

(First)

Rasin Deborah

(Last)

2. Issuer Name and Ticker or Trading

Symbol

DENTSPLY INTERNATIONAL

3. Date of Earliest Transaction

INC /DE/ [XRAY]

(Month/Day/Year)

07/13/2012

5. Relationship of Reporting Person(s) to

Issuer

below)

(Check all applicable)

below)

221 WEST PHILADELPHIA STREET, SUITE 60W

> (Street) 4. If Amendment, Date Original

> > Filed(Month/Day/Year)

VP & Secretary

6. Individual or Joint/Group Filing(Check Applicable Line)

Director

Officer (give title

X Form filed by One Reporting Person Form filed by More than One Reporting

YORK, PA 17405

(City) (State) (Zip)

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

1. Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3)

(Month/Day/Year)

(Middle)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial (I) Ownership (Instr. 4) (Instr. 4)

Reported (A) Transaction(s) or (Instr. 3 and 4) Code V Amount (D) Price

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. Title of Derivative Conversion

3. Transaction Date 3A. Deemed

(Month/Day/Year) Execution Date, if TransactionNumber

5.

6. Date Exercisable and **Expiration Date**

7. Title and Amount of 8. I Underlying Securities

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code of (Instr. 8) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		(Instr. 3 and 4)		Sec (Ins
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
RSU (Restricted Stock Unit)	\$ 37.81	07/13/2012		A	8 (1)	07/13/2015(2)	(3)	Common Stock	8	\$
PRSU	\$ 37.81	07/13/2012		A	7 (4)	07/13/2015 <u>(2)</u>	<u>(3)</u>	Common Stock	7	\$

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Rasin Deborah 221 WEST PHILADELPHIA STREET SUITE 60W YORK, PA 17405

VP & Secretary

Signatures

Deborah M. 07/13/2012

**Signature of Date
Reporting Person

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) Dividend on existing vested or unvested Restricted Stock Units (RSUs) awarded to participant, payable as additional units of phantom stock.
- (2) Vests in full (restrictions lapse) 3 years from date of grant.
- (3) Not applicable to this transaction.
- (4) Dividend on existing vested or unvested Performance based Restricted Stock Units (PRSUs) awarded to participant, payable as additional units of phantom stock.

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.

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