VARON LESLIE F Form 4 July 13, 2018

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB APPROVAL OMB

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subject to Section 16. Form 4 or Form 5 obligations may continue.

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if no longer

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

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * VARON LESLIE F		2. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer				
~ \	Last) (First) (Middle)		DENTSPLY SIRONA Inc. [XRAY]					(Check all applicable)			
(Last)	(First) (Middle)	3. Date of	Earliest Tra	insaction						
			(Month/Da	ay/Year)				_X_ Director		6 Owner	
221 W PHILADELPHIA ST, STE 60W		07/13/2018					Officer (giv	below)	er (specify		
	4. If Amer	4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
	Filed(Mont	Filed(Month/Day/Year)					Applicable Line)				
YORK, PA	(Street) RK, PA 17401 (City) (State) (Zip) de of 2. Transaction Date 2A. Deer rity (Month/Day/Year) Execution		Thea(Month Day Tear)					Form filed by One Reporting Person Form filed by More than One Reporting Person			
(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 Da	te 2A. Dec	emed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of	
Security (Month/Day/Year) Executi		on Date, if TransactionAcquired (A) or				or	Securities	Form: Direct	Indirect		
(Instr. 3)		any		Code	Disposed	of (D))	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)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	07/13/2018			A	4.595 (1)	A	\$ 0	2,303.319	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)

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	2.	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4.	5.	6. Date Exerc Expiration D		7. Titl		8. Price of	9. Nu
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(any (Month/Day/Year)	Code (Instr. 8)	orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year) /e s l		Amou Under Securi (Instr.		Derivative Security (Instr. 5)	Deriv Secur Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

VARON LESLIE F

221 W PHILADELPHIA ST, STE 60W X

YORK, PA 17401

Signatures

Dane Baumgardner, Attorney-In-Fact for Leslie F. Varon 07/13/2018

**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).

Represents dividends on restricted stock units (RSUs) awarded to the Reporting Person in the form of additional RSUs and are subject to (1) 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.

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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