

DENTSPLY SIRONA Inc.
 Form 3
 July 10, 2017

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â Petersohn Walter		(Month/Day/Year)	DENTSPLY SIRONA Inc. [XRAY]	
(Last)	(First)	(Middle)	07/01/2017	
221 WEST PHILADELPHIA STREET STE 60 W			4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
(Street)			(Check all applicable)	
YORK,Â PAÂ 17401			<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner	6. Individual or Joint/Group Filing(Check Applicable Line)
(City)	(State)	(Zip)	<input type="checkbox"/> Officer <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Form filed by One Reporting Person
			(give title below) (specify below)	<input type="checkbox"/> Form filed by More than One Reporting Person
			Chief Commercial Officer	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	44,867.9712 ⁽⁶⁾	D	Â

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

SEC 1473 (7-02)

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
		Title			

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	Date Exercisable	Expiration Date		Amount or Number of Shares		or Indirect (I) (Instr. 5)	
Stock Option (Right to Buy)	Â (1)	02/22/2027	Common Stock	18,600	\$ 62.34	D	Â
Stock Option (Right to Buy)	Â (2)	03/01/2026	Common Stock	15,000	\$ 60.43	D	Â
Stock Option (Right to Buy)	Â (3)	11/25/2024	Common Stock	17,748	\$ 47.41	D	Â
Stock Option (Right to Buy)	Â (4)	11/26/2023	Common Stock	9,488	\$ 37.26	D	Â
Stock Option (Right to Buy)	Â (5)	11/20/2022	Common Stock	7,937	\$ 34.29	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Petersohn Walter 221 WEST PHILADELPHIA STREET STE 60 W YORK, PA 17401	Â	Â	Â Chief Commercial Officer	Â

Signatures

Michael Friedlander, Attorney-In-Fact for Walter Petersohn
07/10/2017

**Signature of Reporting Person

Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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) Stock Options vest in annual one-third (1/3) increments over a three-year period ending February 22, 2020.
- (2) Stock Options vest in annual one-third (1/3) increments over a three-year period ending March 1, 2019.
- (3) 25% vested on 11/25/2015, 25% vested on 11/25/2016, 20% shall vest on 11/25/2017, 20% shall vest on 11/25/2018 and the final 10% shall vest on 11/25/2019.
- (4) Stock Options vest in annual one-fourth (1/4) increments over a four-year period ending November 26, 2017.
- (5) This option is fully vested and exercisable.
- (6) Includes 34,120.9712 Restricted Stock Units (RSUs).

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.