Newell William E Form 4 February 20, 2019

FORM 4

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

OMB Number: 3235-0287

Check this box if no longer STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

Expires: January 31, 2005

OMB APPROVAL

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

SECURITIES

Estimated average burden hours per response... 0.5

Form 5 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).

Common

Common

Stock

Stock

02/17/2019

02/17/2019

(Print or Type Responses)

1. Name and A Newell Will	Symbol	2. Issuer Name and Ticker or Trading Symbol DENTSPLY SIRONA Inc. [XRAY]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (N	Middle) 3. Date o	f Earliest Ti	ransaction		`	11	,	
221 W PHILADELPHIA ST, STE (Month/D) 60W (02/17/20			• 1			Director 10% Owner Number Other (specify below) below) Chief Segment Officer			
(Street) 4. If Ame			endment, Da	ate Original		6. Individual or Joint/Group Filing(Check			
YORK, PA 17401			nth/Day/Year	·)		Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip) Tab	le I - Non-I	Derivative Se	ecurities Acq	quired, Disposed o	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	on(A) or Disp (Instr. 3, 4		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	02/17/2019		A	663 <u>(1)</u> A	A \$0	14,997.979	D		

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

F

F

257 (2) D

998 (3) D

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14,740.979

13,742.979

D

D

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number.

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	ınt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
	·				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						`
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title N	Number		
						2			of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Newell William E

221 W PHILADELPHIA ST, STE 60W Chief Segment Officer

YORK, PA 17401

Signatures

Dane Baumgardner, Attorney-In-Fact for William E
Newell
02/20/2019

**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) Represents the vesting of Performance-based Restricted Stock Units (PRSUs) and related dividend equivalent rights.
- (2) Shares withheld to cover taxes related to the vesting of the reporting person's PRSUs.
- (3) Shares withheld to cover taxes related to the vesting of the reporting person's Restricted Stock Units plus dividend equivalent rights, each as previously reported in Table I.

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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