Kowaloff Arthur D Form 4 November 21, 2017

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

0.5

January 31, Expires: 2005

OMB APPROVAL

Estimated average burden hours per response...

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. See Instruction

30(h) of the Investment Company Act of 1940

1(b).

Common

Stock

11/21/2017

(Print or Type Responses)

1. Name and Address of Reporting Person ** Kowaloff Arthur D			2. Issuer Name and Ticker or Trading Symbol DENTSPLY SIRONA Inc. [XRAY]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
221 WEST PHILADELPHIA STREET, SUITE 60W			Month/Da 11/21/20	•		X Director 10% Owner Officer (give title below) Other (specify below)			
(Street)			I. If Amen	dment, Dat	e Original	6. Individual or Joint/Group Filing(Check			
	F	Filed(Mont	h/Day/Year)		Applicable Line) _X_ Form filed by One Reporting Person				
YORK, PA 17401						Form filed by More than One Reporting Person			
(City)	(State)	Zip)	Table	I - Non-Do	erivative Securities Ac	quired, Disposed	of, or Beneficial	lly Owned	
1.Title of	2. Transaction Date	2A. Deeme	ed	3.	4. Securities	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)	Execution	Date, if	Transactio	nAcquired (A) or	Securities	Form: Direct	Indirect	
(Instr. 3)		any		Code	Disposed of (D)	Beneficially	(D) or	Beneficial	
		(Month/Da	ay/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)			

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.

29,956.03

D

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

Code V Amount (D)

V 1,145

G

Price

\$0

D

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1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Titl		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	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative		•		Securities	3		(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						(2.11541
					4, and 5)						
					i, and 3)						
									Amount		
						Data	Evaluation		or		
							Expiration Date	Title	Number		
									of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

Kowaloff Arthur D

221 WEST PHILADELPHIA STREET SUITE 60W

YORK, PA 17401

Signatures

Michael Friedlander, Attorney-In-Fact for Arthur D. Kowaloff

11/21/2017

**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).

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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