SLOVIN JEFFREY

Form 4 March 16, 2011

FORM 4

OMB APPROVAL UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB

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Check this box if no longer subject to

Washington, D.C. 20549

Expires: January 31,

2005

subject to Section 16. Form 4 or Form 5 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF 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).

(Print or Type Responses)

1. Name and Address of Reporting Person *

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

SLOVIN JEFFREY

(Last)

(City)

SIRONA DENTAL SYSTEMS, INC. [SIRO]

(Check all applicable)

INC. [SIRO]

(Middle)

(Zip)

3. Date of Earliest Transaction (Month/Day/Year)

X Director _____ 10% Owner ____ Specify Other (give title _____ Other (specify

C/O SIRONA DENTAL SYSTEMS,

(First)

03/15/2011

Symbol

PRESIDENT AND DIRECTOR

INC., 30-30 47TH AVE, SUITE 500 (Street)

4. If Amendment, Date Original

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

Filed(Month/Day/Year)

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

Person

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

below)

LONG ISLAND CITY, NY 11101

(State)

		Tabi	Table 1- Non-Derivative Securities Acquired, Disposed of, or Deficiency Owned						
1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3.	4. Securitie	•		5. Amount of Securities	6. Ownership	7. Nature of Indirect
(Instr. 3)	(Month/Day/Tear)	any	Code	ion(A) or Disposed of (D) (Instr. 3, 4 and 5)			Beneficially	Form: Direct	Beneficial
		(Month/Day/Year)	(Instr. 8)				Owned Following	(D) or Indirect (I)	Ownership (Instr. 4)
					(A)		Reported Transaction(s)	(Instr. 4)	
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)		
Common Stock	03/15/2011		M	185,901	A	\$ 10.5	340,000	D	
Common Stock	03/16/2011		S	300,000	D	\$ 48.5	40,000	D	

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

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SEC 1474

(9-02)

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. Number of tiorDerivative Securities) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount of Number of Shares
Option	\$ 10.5	03/15/2011		M		185,901	06/20/2006	06/09/2014	Common Stock	185,90

Reporting Owners

Reporting Owner Name / Address Relationships

X

Director 10% Owner Officer Other

SLOVIN JEFFREY C/O SIRONA DENTAL SYSTEMS, INC. 30-30 47TH AVE, SUITE 500 LONG ISLAND CITY, NY 11101

PRESIDENT AND DIRECTOR

Signatures

/s/ Jeffrey T. Slovin, by Michael Friedlander,
Attorney
03/16/2011

**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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