DENTSPLY SIRONA Inc. Form 3 March 01, 2016 UNITED STATES SECURITIES AND EXCHANGE COMMISSION FORM 3 Washington, D.C. 20549 OMB

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

OMB APPROVAL

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(Print or Type Responses)

1. Title of (Instr. 4)

1. Name and Address of Reporting Person <u>*</u> Friedman Jonathan I			2. Date of Event RequiringStatement(Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol DENTSPLY SIRONA Inc. [XRAY]				
(Last) C/O SIRONA	_		02/29/2016	4. Relationship of Reporting Person(s) to Issuer (Check all applicable)		5. If Amendment, Date Original Filed(Month/Day/Year)		
SYSTEMS, INC., 30-30 47TH AVENUE, SUITE 500 (Street) LONG ISLAND CITY,, NY 11101				Director 10% Owner X Officer Other (give title below) (specify below) General Counsel and Secretary		Owner r ow)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting	
							Person Form filed by More than One Reporting Person	
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Beneficially Owned					
1.Title of Securi (Instr. 4)	ty		2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	1	
Reminder: Report owned directly o	-	ate line for ea	ach class of securities benefic	ially S	SEC 1473 (7-02	2)		
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currently valid OMB control number.

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

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

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Shares	or Indirec
Shares	or mullec
	(I)
	(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Friedman Jonathan I C/O SIRONA DENTAL SYSTEMS, INC. 30-30 47TH AVENUE, SUITE 500 LONG ISLAND CITY,, NY 11101	Â	Â	General Counsel and Secretary	Â		
Signatures						
/s/ Michael Friedlander Attorney-in-Fact for Jonathan Friedman		n I.	03/01/2016			
**Signature of Reporting Person			Date			
Explanation of Response	es:					

No securities are beneficially owned

- * 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).

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Remarks:

On February 29, 2016, pursuant to an Agreement and Plan of Merger, dated as of September 15,Â

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.