Edgar Filing: COLEMAN MICHAEL J - Form 4

COLEMAN	I MICHAEL J									
Form 4										
July 13, 201	12							PPROVAL		
FORM	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									
	UNITED					COMMISSIO	ONID	3235-0287		
Check the	his box	v	ashington, I	J.C. 2054	9		Number:	January 31,		
	if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF						Expires:	2005		
subject to Section 16. SECURITIES							Estimated	Estimated average		
Form 4		SLeena	1120		burden hours per response 0.5					
Form 5							10300130	. 0.0		
obligatio	$\frac{170}{170}$					of 1935 or Section	on			
may cor <i>See</i> Inst		30(h) of the	Investment C	Company A	Act of 1	940				
1(b).										
(Print or Type	Responses)									
1 Name and	Address of Reporting	Person* 2 L		Г: -1 т		5. Relationship of	of Reporting Per	rson(s) to		
	N MICHAEL J	Symbo	uer Name and T	licker of 1ra	aang	Issuer	n Reporting I ei	301(3) 10		
			,, TSPLY INTE	RNATIO	NAL.					
			DE/ [XRAY]		111112	(Che	eck all applicabl	e)		
(Last)	(First) (e of Earliest Trar	-		Director	109	% Owner		
			h/Day/Year)	lisaction		Officer (give title Other (specify				
221 WEST	PHILADELPHIA		6/2012			below)	below)			
STREET, V	WEST									
BUILDING	G/DENTSPLY									
			Amendment, Date Original			6. Individual or Joint/Group Filing(Check				
			Month/Day/Year)			Applicable Line)				
						X Form filed by Form filed by	One Reporting P More than One R			
YORK, PA	17405					Person	wore than one R	epotting		
(City)	(State)	(Zip) T	able I - Non-De	rivative Sec	curities A	cquired, Disposed	of, or Beneficia	lly Owned		
1.Title of	2. Transaction Date	2A. Deemed	3. 4.	. Securities		5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)			-			Form: Direct	Indirect		
(Instr. 3)		any (Month/Day/Year		Disposed of (D) (Instr. 3, 4 and 5)			D) or Indirect	Beneficial Ownership		
		(Wolldi)/Day/Teal) (IIIsu. 8) (I	illsu. <i>3</i> , 4 all	u <i>5)</i>		(I) (Instr. 4)	(Instr. 4)		
				(A)	Reported				
				01		Transaction(s)				
			Code V A	Amount (D) Price	(Instr. 3 and 4)				
Reminder Re	port on a separate line	e for each class of s	ecurities benefic	ially owned	directly	or indirectly				
Reminder. Re	port on a separate line	i or each class of s	courties benefic.	-	-	multicetry.	ction of	SEC 1474		

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Edgar Filing: COLEMAN MICHAEL J - Form 4

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. Transa Code (Instr.		5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. F Der Sec (Ins
				Code	V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
RSU (Restricted Stock Unit)	\$ 37.81	07/13/2012		А		7 (1)	07/15/2015(2)	(3)	Common Stock	7	\$

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
COLEMAN MICHAEL J 221 WEST PHILADELPHIA STREET WEST BUILDING/DENTSPLY YORK, PA 17405								
Signatures								
Deborah M. Rasin, POA for Michael J. Coleman		07/13/2	012					
<pre>**Signature of Reporting Person</pre>		Date						
Explanation of Respons	ses:							

- * 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) Dividend on existing vested or unvested Restricted Stock Units (RSUs) awarded to participant, payable as additional units of phantom stock.
- (2) Vests in full (restrictions lapse) 3 years from date of grant.

(3) Not applicable to this transaction.

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.