SEC For	rm 4 FORM	4	UNITED) STA	ATES S	ECU	RITIE	S AN	DE	ХСНА	NGE	C	OMMI	SSION					
		onger subject to	Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNE										NERS	HIP	ОМВ	OMB APPROVA OMB Number: 32 Estimated average burden			
Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).			Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940										34			s per res	•	0.5	
1. Name and Address of Reporting Person [*] DINKINS JAMES L						2. Issuer Name and Ticker or Trading Symbol <u>Monster Beverage Corp</u> [MNST]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) C/O THE COCA-COLA COMPANY						3. Date of Earliest Transaction (Month/Day/Year) 06/13/2022								Officer (give title Other (specify below) below)					
ONE COCA-COLA PLAZA (Street)					4. If Am	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
ATLANTA GA 30313														Form filed by More than One Reporting Person					
(City) (State) (Zip) Table I - Non-Deriva					vative S	ocuriti		wired	Die	nosed o	forl	Ron	oficiall	v Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)		d (A) or) or 5. Amount of		Form	vnership : Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	v	Amount	(A (D	() or))	Price	Transact (Instr. 3 a	ion(s)					
Common Stock 06/13								М	м 1,790)	A	(1)	1,7	790	D			
			Table II -							osed of, convertil				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,	Code (Instr.		Derivative I		6. Date Exercisable and Expiration Date (Month/Day/Year)			e and int of ities rlying ative 3 an	l Security	8. Price of Derivative Security (Instr. 5)	9. Number derivativ Securitie Beneficia Owned Followin Reported Transact	e is ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownershi t (Instr. 4)	
				ſ									Amount		(Instr. 4)	1011(8)		1	

Explanation of Responses:

(1)

(3)

1. Each restricted stock unit represents either (i) a contingent right to receive one share of the Company's common stock or (ii) a cash amount equal to the number of shares received as of the vesting date. These restricted stock units were settled as shares of common stock.

Date Exercisable

06/13/2022

(4)

Expiration Date

(2)

(2)

Title

Commor

Stock

Commor

Stock

2. Not applicable.

Restricted

Restricted

Stock Units

Stock Units

3. Each restricted stock unit represents either (i) a contingent right to receive one share of the Company's common stock or (ii) a cash amount equal to the number of shares received as of the vesting date.

4. The restricted stock units vest with respect to 100% of such restricted stock units on the last business day prior to the Company's 2023 annual stockholder meeting, provided that the reporting person continues as a director of the Company through such date.

> /s/ Paul J. Dechary, attorney-in-06/15/2022 fact

** Signature of Reporting Person Date

Amount or Number

Shares

1,790

1,987

(1)

\$<mark>0</mark>

0

1,987

D

D

of

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

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

06/13/2022

06/14/2022

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

v

(A)

1,987

(D)

1,790

Code

М

Α

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.