FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  POLK BENJAMIN					2. Issuer Name <b>and</b> Ticker or Trading Symbol  Monster Beverage Corp [ MNST ]									(Che	ck all applic	ationship of Reporting k all applicable) Director		son(s) to Iss		
(Last) (First) (Middle) 1 MONSTER WAY			3. Date of Earliest Transaction (Month/Day/Year) 06/13/2016  Officer (give title below)							Other (specify below)										
(Street)	A C	A	92879		4. 11	f Ame	endment,	Date	of Or	iginal Fi	led (	(Month/Da	ay/Year)		6. Inc	Form f	led by One	e Repo	g (Check Ap orting Person One Repo	on
(City)	(Si	•	(Zip)																	
Table I - Nor  1. Title of Security (Instr. 3)			-Derivative So 2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year		e, (	3. Transaction Code (Instr		4. Securi	ities Acquired (A) d Of (D) (Instr. 3,		(A) or	5. Amou Securitie Benefici Owned I Reporte Transac	nt of es ally Following d tion(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common	Stock			06/1	3/201	6			+	M	_	972	(ı	) A	(1)	(Instr. 3	936		D	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of	3. Transaction Sale Date Services (Month/Day/Year) 3A. Deem Execution if any			(e.g., puts, cal		Ils, warrants,  5. Number 6 n of E		uired, Disposed of, or Beneficions, options, convertible securities  6. Date Exercisable and Expiration Date (Month/Day/Year)  7. Title and Amount of Securities Underlying					8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial	:	Ownership Form:	11. Nature of Indirect Beneficial Ownership		
<b></b>	Derivative Security				-,		Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)						Derivative Secu (Instr. 3 and 4)		ecurity 4)	(man e)	Owned Following Reported Transaction (Instr. 4)		or Indirect (I) (Instr. 4)	(Instr. 4)
					Code	v	(A)	(D)	Date Exe	e rcisable		opiration	Title	0 N	amount or lumber of shares					
Restricted Stock Units	(1)	06/13/2016			M			972	06/	13/2016		(2)	Comm Stock		972	(1)	0		D	
Restricted Stock Units	(3)	06/14/2016			A		1,079			(4)		(2)	Comm Stock		1,079	\$0	1,079	)	D	
Stock Option (right to buy)	\$19.2									(5)	06	6/09/2020	Comm Stocl		4,334		4,334	ļ	D	
Stock Option (right to buy)	\$34.06									(5)	05	5/18/2021	Comm Stocl		2,590		2,590		D	

## **Explanation of Responses:**

- 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. The reporting person settled these restricted stock units in shares of common stock.
- 2. Not applicable.
- 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 2017 annual shareholder meeting, provided that the reporting person continues as a director of the Company through such date.
- 5. The options are currently vested.

/s/ Paul J. Dechary, attorney-in-06/14/2016 fact

\*\* Signature of Reporting Person

Date

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).
- \*\* 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.

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.