FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
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Estimated average burden								
hours per response	: 0.5							

to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

1. Name and Address of Reporting Person* O Brien Raymond V III					2. Issuer Name and Ticker or Trading Symbol CVB FINANCIAL CORP [CVBF]								(Che	Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last)						3. Date of Earliest Transaction (Month/Day/Year) 03/17/2021									_	er (give title		Other (s	
(Street) ONTARI			1764 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									Form	r Joint/Group Filing (Check Applicable I filed by One Reporting Person I filed by More than One Reporting on			
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Bene	ficial	ly Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date					Execution Date,			3. Transaction Code (Instr. 8) 4. Securitie Disposed C						Benefic	ies cially Following	Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) (D)	or F	rice		ction(s)			(msur 4)
Common Stock			03/17/	2021				A		3,606	A	A	\$0.00	00 40,289			D		
		Tal									osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any			on Date,	Transaction Code (Instr. 8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr	rities lired r osed) r. 3, 4	6. Date Expirati (Month/	on Da		7. Title and Amount of Securities Underlying Derivative Security (Insi 3 and 4)		str.	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	of						

Explanation of Responses:

/s/ Raymond V O Brien III

03/18/2021

** Signature of Reporting Person

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.