Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per respons	e: 0.5							

Check this box if no longer subject 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

1. Name and Address of Reporting Person* Sheehy Kimberly H.					2. Issuer Name and Ticker or Trading Symbol CVB FINANCIAL CORP [CVBF]									(Ct	neck all app X Direc	ationship of Reporting k all applicable) Director		rson(s) to Is		
(Last)	(Fir	est) (N	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 05/15/2024										Office below	er (give title /)		Other (s below)	specify	
701 N. HAVEN AVE.					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicat Line)					
(Street)														X Form filed by One Reporting Person Form filed by More than One Reporting						
ONTAR	IO CA	A 9	1764			Person Person											or unig			
(City) (State) (Zip)						Rule 10b5-1(c) Transaction Indication														
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or l	Ben	eficia	ally Own	ed				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Execution			Date,			es Acquired (A Of (D) (Instr. 3,			Benefic Owned	ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A (D) or)	Price		ted action(s) 3 and 4)			(Instr. 4)	
Common Stock 05/15/					2024		Α		4,899		A	\$ <mark>0</mark>	10	6,117		D				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		of	r osed (1. 3, 4	6. Date Expirati (Month/	on Da	e Ame Sec Und Der Sec		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code V		(A)	(D)	Date Expiral Exercisable Date		Expiration Date	Title	or Nur of	ount mber ares						

Explanation of Responses:

/s/ Kimberly Sheehy

05/16/2024

** Signature of Reporting Person

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

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.

^{*} 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).