SEC Form 3 FORM 3

## UNITED STATES SECURITIES AND EXCHANGE

Washington, D.C. 20549

OMB APPROVAL

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## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response: 0.5

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 A LaPoint F	ddress of Repo <mark>rancene</mark>	orting Person <sup>*</sup>	2. Date of E Requiring S (Month/Day 05/17/202	itatement /Year)	3. Issuer Name and Ticker or Trading Symbol <u>CVB FINANCIAL CORP</u> [ CVBF ]					
(Last) 701 N. HAV	(First) ZEN AVE.	(Middle)	03/1//2021		4. Relationship of Reporting Issuer (Check all applicable) Director X Officer (give title below) SVP Chief Account	Person(s 10% C	F	<ul> <li>5. If Amendment, Date of Original Filed (Month/Day/Year)</li> <li>6. Individual or Joint/Group Filing</li> </ul>		
(Street) ONTARIO	СА	91764				below)	(specify (C	(Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)								
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)				1	2. Amount of Securities Beneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Dwnership (Instr. 5)		
Common Stock					14,100	I				
Table II - Derivative Securities Beneficially Owned           (e.g., puts, calls, warrants, options, convertible securities)										
Ex (M			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securitie Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise	e Form:	6. Nature of Indirect Beneficial Ownership (Instr.	
			Date Exercisable	Expiration Date	Title	Amount or Security Number of Shares		Direct (D) or Indirect (I) (Instr. 5)	5)	

**Explanation of Responses:** 

## /s/ Francene LaPoint

<u>05/24/2021</u> Date

\*\* 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 5 (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.