FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	VAL						
OMB Number:	3235-0287						
Estimated average burden							
hours per response:	0.5						
	OMB Number: Estimated average burde						

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

Name and Address of Reporting Person* Alexander Robert M.				2. Issuer Name and Ticker or Trading Symbol CAPITAL ONE FINANCIAL CORP [COF									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title below) below)						
(Last) 1680 CA	FAPITAL ON	,	(Middle)		3. Date of Earliest Train 02/10/2016				nsaction	ı (Mon	th/Day/Year)			Chief Information Officer					
(Street) MCLEA	N V	A	22102		4.1	f Amer	ndmei	nt, Date	of Orig	inal Fi	led (Month/D	ay/Year)		6. Ind Line) X	Form Form	Joint/Grou filed by Or filed by Mo	ne Repo	orting Pers	on
(City)	(S	tate)	(Zip)												Perso	n			
		Tab	le I - N	lon-Deri	vativ	Sec	urit	ies A	cquire	ed, D	isposed o	of, or B	enefic	ially	Owne	t			
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Yea		Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Disposed O		Beneficially Owned Following		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
					İ			Code	v	Amount	(A) or (D)	Price	Reported Transaction(: (Instr. 3 and 4		ion(s)			(Instr. 4)	
Common	Common Stock 02/10/201		2016	16		M		3,287	A	\$0.000	.0000(1)		01,471		D				
Common Stock 02/10/20		2016	16		F ⁽²⁾		1,814	D	\$62.	2.24 99		.657 D		D					
Common	Common Stock 0		02/10/2	02/10/2016				D		3,287	D	\$62.7	74 ⁽¹⁾ 96,		370 1		D		
Common Stock													2			Ι .	Robert M. Alexander UGMA		
Common Stock														100		I		The Alexander Fund	
		7	able I								sposed of , converti				Owned				
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) if any (Month/Day/Year)		emed tion Date,	Date, Transac		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e Ownersh s Form: Direct (D or Indirect (I) (Instr.		Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amou or Numb of Shares	er					
2013 Restricted Stock	\$0.0000(1)	02/10/2016			M			3,287	(3	(3) (3)		Commor Stock	3,28	7 \$	\$0.0000 ⁽¹⁾ 0.000		00	D	

Explanation of Responses:

- 1. On February 10, 2016 the restricted stock units were settled in cash based on the Company's average fair market value of shares of common stock over the twenty trading days preceding the vesting date.
- 2. Represents the automatic withholding by the issuer to satisfy the reporting person's tax obligation associated with the vesting of restricted stock granted on January 31, 2013. This is authorized in the applicable restricted stock award agreement.
- 3. These restricted stock units vest in 1/3 increments beginning on February 10, 2014 and annually thereafter.

Cleo Belmonte (POA on file)

** 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.