FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington,	D.C.	20549	

wasnington,	D.C.	20549

OIVID APPROVAL									
OMB Number:	3235-0287								
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hours per response:	0.5								

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

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]								ck all app Direc Office	nship of Report applicable) Director Officer (give title		10% Other	Owner (specify		
(Last) 1680 CA	(Fir PITAL ON	,	Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/11/2022								below) below) Chief Information Officer						
(Street) MCLEA	N VA	A 2	2102		4. If Amendment, Date				e of Original Filed (Month/Day/Year)					Line)	is. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(St		Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
D			2. Transaction Date (Month/Day/Year)		Execution Date, ar) if any		3. Transaction Code (Instr. 8) 4. Securities Disposed Of 5)		Acquired (A) or (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned tollowing		Form: Direct I (D) or Indirect I (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(111501.4)
Common	Stock ⁽¹⁾			03/11/20	22				A		26,046	A	\$	0	80,	956		D	
Common	Stock			03/11/20	22				F ⁽²⁾		11,747	D	\$130	0.09	69,	209	D		
Common	Stock	ock												2			I	Robert M. Alexander UGMA	
Common	Stock														100 I			I	The Alexander Fund
		Tal	ble II								posed of, convertib				Owne	t			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	exercise (Month/Day/Year) Execution Date, if any (Month/Day/Year) ivative urity Execution Date, if any (Month/Day/Year) (Month/Day/Year) 8)			5. Num of Derive Secun Acqui (A) or Dispo of (D) (Instr. and 5	ative ities ired sed 3, 4	Expiration Date A (Month/Day/Year) S U D S				7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e s ally g	10. Ownersh Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)		
					Code	\ \ \	(A)	(D)	Date	rieahla	Expiration		or Number of						

Explanation of Responses:

- 1. These shares were earned pursuant to an award of performance shares granted on January 31, 2019 based on the Company's Common Dividends + Growth of Tangible Book Value per Share and Adjusted ROTCE against a peer group of companies over a three-year performance period. These shares represent the number of shares paid out based on actual performance plus the dividend shares
- 2. These shares were automatically withheld by the Company to satisfy the reporting person's tax obligation associated with the settlement of the performance shares. This share withholding was authorized in the performance share award agreement.

Remarks:

/s/ Cleo Belmonte (POA on

03/15/2022

** 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.