FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vvasimigton,	D.C.	20040

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
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* Sanjiv Yajnik						2. Issuer Name and Ticker or Trading Symbol CAPITAL ONE FINANCIAL CORP COF Solution Symbol (Check all applicable)																
Sanjiv rajink					Ιī											Director			10% Owner			
() () () () () () () () () ()						,										Officer below)	r (give title Other (s r) below)			specify		
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 04/14/2021										President, Financial Services						
1680 CAPITAL ONE DRIVE						/14/2	021															
(041)					4.1											6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) MCLEA	N V	Δ	22102												1 1		filed by One	Reno	orting Perso	ın		
	1 V 7	. •	22102												1		,		n One Repo	- 1		
(City)	(S	tate)	(Zip)			Perso																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
			Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.) 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)					es ally Following	Form (D) o		7. Nature of Indirect Beneficial Ownership				
									Cod	ie V		Amount	(A) or D)	Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common	Common Stock ⁽¹⁾ 04			04/14	4/202	/2021		N.	1		22,46	2	A	\$86.34	95,812			D				
Common	nmon Stock ⁽¹⁾ 04/1			4/202	/2021			S			33,684 D		\$135 ⁽²	62,128			D					
		-	Гable II -													Owned						
				· • · ·		Can	_				_	onvertil	_							1		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	Date,	ate, Transac Code (Ir		of I		Expira	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		s Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transactio (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
															Amount or							
					Code	v	(A)	(D)	Date Exerci	sable		xpiration ate	Title		Number of Shares							
Stock Options ⁽¹⁾	\$86.34	04/14/2021			М			22,462	(3)	0:	2/02/2027	Comi		22,462	\$0	0		D			

Explanation of Responses:

- 1. This transaction was executed pursuant to a trading plan entered into by the reporting person on January 28, 2021, in accordance with Rule 10b5-1 of the Securities Exchange Act of 1934, as amended.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$135.00 to \$135.07. Information regarding the number of shares sold at each price will be provided upon request.
- 3. This option became exercisable in 1/3 increments beginning on February 15, 2018 and annually thereafter.

Remarks:

/s/ Cleo Belmonte (POA on file)

04/15/2021

** Signature of Reporting Person

Date

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.