FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL				
l	OMB Number:	3235-0287				
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l	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								5. Relationship of Reporting Person(s) to Is (Check all applicable) Director 10% O X Officer (give title Others)				
(Last) (First) (Middle) 1680 CAPITAL ONE DRIVE							3. Date of Earliest Transaction (Month/Day/Year) 12/12/2016										ıancial	below)	
(Street) MCLEA (City)			22102 (Zip)		4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Chaine) X Form filed by One Reporting Form filed by More than On Person										rting Persor	n		
		Tab	le I - No	n-Deriv	vativ	e Se	curit	ties Ac	quired	, Dis	sposed o	f, or Be	nefici	ally	Owned				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day						Execution			Transaction Disposed Code (Instr.		ies Acquired (A) or Of (D) (Instr. 3, 4 and				es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct Indirect I	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common Stock ⁽¹⁾ 12/12/2							016		М		23,560	A	A \$76.79		175,387(2)			D	
Common Stock ⁽¹⁾ 12/12/2						2016		S		9,700	D	\$90.	69 ⁽³⁾	165	5,687		D		
Common Stock ⁽¹⁾ 12/12/2						2016		S		13,860	D	\$90.	\$90.15(4)		151,827		D		
		-	Table II								osed of, convertil				wned			,	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	Date,	Code (Inst		on of		6. Date E Expiratio (Month/D	n Dat		of Securities		D S	Price of erivative ecurity nstr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amou or Numb of Share	er					
Stock	\$76.79	12/12/2016			M			23,560	(5)		03/01/2017	Common	23,56	60 :	\$0.0000	0.000	0	D	

Explanation of Responses:

- 1. This transaction was executed pursuant to a trading plan entered into by the reporting person on November 11, 2016, in accordance with Rule 10b5-1 of the Securities Exchange Act of 1934, as amended.
- 2. Includes shares acquired by the reporting person through the Company's Associate Stock Purchase Plan since the last reported transaction.
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$90.50 to \$91.05. Information regarding the number of shares sold at each price will be provided upon request.
- 4. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$89.50 to \$90.49. Information regarding the number of shares sold at each price will be provided upon request.
- $5. \ This \ option \ became \ exercisable \ in \ 1/3 \ increments \ beginning \ on \ March \ 2, \ 2008 \ and \ annually \ thereafter.$

Cleo Belmonte (POA on file) 12/14/2016

** 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.