FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL	
OMB Number:	3235-028
Estimated average burden	
hours per response:	0.9

	Check this box if no longer subject to Section 16. Form 4
ıı	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	on 30(n) of th	e investme	nt Com	pany Act of	1940							
Name and Address of Reporting Person*     Berson Jory A					2. Issuer Name <b>and</b> Ticker or Trading Symbol CAPITAL ONE FINANCIAL CORP [ COF ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director 10% Owner				
													l x	Officer (give title below)			ecify below)	
(Last) (First) (Middle) 1680 CAPITAL ONE DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 02/01/2018								Chief Human Resources Officer				
(Street) MCLEAN V	A	22	102		4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individu	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
(City) (S	ate)	(Zip	))															
			Т	able I -	Non-Deri	vative Se	curities A	cquired	, Disp	osed of	, or Benet	ficially Own	ied					
1. Title of Security (Instr. 3)			2. Transacti Date (Month/Day	/Year) Exec	2A. Deemed Execution Date, if any	Code (Inst	Code (Instr. 8) 3, 4 and		·			Beneficially Owned For Reported Transaction(		Ownership Form: irect (D) or Indirect (I) nstr. 4)				
						(Mon	th/Day/Year)	Code	V	Amount		(A) or (D)		Instr. 3 and 4)			4)	
Common Stock <sup>(1)</sup>					02/01/20	018		A		11	,140	A	\$ <mark>0</mark>	82,203 <sup>(2)</sup> D				
Common Stock														6,706(3)		I	By 401(k)	
				Table I							r Benefic e securiti	ially Owned es)	i					
Title of Derivative Security (Instr. 3)			4. Transac (Instr. 8)	tion Code	Securities A	lumber of Derivative urrities Acquired (A) or posed of (D) (Instr. 3, 4 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Derivative Security (Instr. 3 and 4		ities Underlying and 4)	Underlying 8. Price of Derivative Security (Instr. 5)		of 10. Ownership Form: Direct (D) or Indirect y (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercis		Expiration Date	Title		Amount or Number of Share	es	Reported Transaction (Instr. 4)	n(s)		
2018 Pactricted Stock Units	en n(4)	02/01/2018		Δ		= ona(5)	1	(6)		(6)	Comm	on Stock	E 002(5)	60	E 902	n n		

#### Explanation of Responses:

- 1. This restricted stock unit award will vest in 1/3 increments beginning on February 15, 2019 and annually thereafter. Each restricted stock unit represents a contingent right to receive one share of Company common stock.

- 1. This restricted stock units will be settled in cash based on the Company's Associate Stock Purchase Plan since the last reported transaction.

  3. Represents the reporting person's equivalent share ownership in the Company's 480ciate Stock Purchase Plan since the last reported transaction.

  4. Each restricted stock unit will be settled in cash based on the Company's 401(k) Plan, a unitized plan, as of the date of the latest transaction.

  4. Each restricted stock unit will be settled in cash based on the Company's average fair market value of the underlying shares of common stock over the fifteen trading days preceding the vesting date.

  5. This award is reported net of 190 units automatically withheld by the Company to satisfy the reporting person's tax obligation.

  6. These restricted stock units will vest in 1/3 increments beginning on February 15, 2019 and annually thereafter.

## Remarks:

Exhibit 24.1 - Power of Attorney - Berson

Cleo Belmonte (POA on file)

02/05/2018

\*\* 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.

## Exhibit 24.1

POWER OF ATTORNEY

The undersigned hereby constitutes and appoints Matthew W. Cooper, Polly N. Klane and Cleo Belmonte, each of them, as the true and lawful attorneys-in-fact (with

- (1) execute, for and on behalf of the undersigned, any and all statements and reports required or permitted to be filed by the undersigned, in any and all ca
- (2) do and perform any and all acts for and on behalf of the undersigned which may be necessary or desirable to complete and execute any such statements and
- (3) take any other action of any type whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may be of benefit to, in the
- (4) request and receive from any broker (i) periodic reports detailing the undersigned's retail holdings of the Company's securities held in his or her account the undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever required, necessary

This Power of Attorney revokes all prior Powers of Attorney submitted to the Company with respect to the matters expressed herein, and shall remain in full force

IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 1st day of February 2018.

/s/ Jory A. Berson Name: Jory A. Berson

ACKNOWLEDGEMENT FOR POWER OF ATTORNEY

STATE OF VIRGINIA ) ss.
CITY/COUNTY OF FAIRFAX

The foregoing instrument was acknowledged before me this 1st day of February, 2018 by Jory A. Berson.

/s/ Jamie N. Sklaney Notary Public

(SEAL)

My commission expires 10/31/2020