FORM 4

Check this box if no longer subject to

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	
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STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

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

1. Name and Address of Reporting Person* Berson Jory A				CAPITAL ONE FINANCIAL CORP [COF]									ck all applica Director	all applicable) Director		10% Ow	vner			
(Last) 1680 CAP	(Fir PITAL ONE	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/10/2015								below)	Officer (give title Other (spe below) Chief Human Resources Officer			·		
(Street) MCLEAN (City)	VA (Sta		22102 Zip)		4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)								ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Tal	le I - No	n-Deriv	/ativ	e Se	curi	ties Ac	quired	, Dis	posed of,	or Ben	eficially	Owned						
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transa Code (4. Securities Disposed O		5. Amoun Securities Beneficial Owned Fo	s lly ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) or (D)	Price	Reported Transaction (Instr. 3 and	on(s)			nstr. 4)			
Common Stock ⁽¹⁾			03/10	3/10/2015				М		27,915	A	\$0.0000	97,3	68 ⁽²⁾	D					
Common S	Common Stock		03/10	0/2015				F ⁽³⁾		13,316	D	\$77.72	84,0	84,052		D				
Common Stock														6,39	91 ⁽⁴⁾			By 101(k)		
			Table II -						,		osed of, c		•	wned			,			
1. Title of Derivative Security (Instr. 3) 2. Convers or Exerc Price of Derivativ Security		ercise (Month/Day/Year) of ative	3A. Deeme Execution if any (Month/Da	Date,	Code (Insti		n of		6. Date Exercisa Expiration Date (Month/Day/Yea		of Securities		ties ig e Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficial Owned Following Reported Transacti (Instr. 4)	e ss ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares							
Performance Share Units	\$0.0000(1)	03/10/2015			M			27,915	(1)	-	03/15/2015 ⁽¹⁾	Common Stock	27,915	\$0.0000	0.000	00	D			

Explanation of Responses:

- 1. These performance shares for the January 31, 2012 grant were settled at the end of a three-year period based on the Company's Adjusted ROA against a peer group of companies. These shares represent the number of shares paid out based on actual performance plus the dividend shares accrued under the same grant.
- 2. Includes shares acquired by the reporting person through the Company's Associate Stock Purchase Plan since the last reported transaction.
- 3. These shares were automatically withheld by the Company to satisfy the reporting person's tax obligation associated with the settlement of the performance shares for the January 31, 2012 grant. This is authorized in the performance share award agreement.
- 4. Represents the reporting person's equivalent share ownership in the Company's 401(k) Plan, a unitized plan, as of the latest transaction.

Gregory W. Seward (POA on

03/12/2015

<u>file)</u>

** 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.