FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Check this box if no longer subject to Section 16. Form 4 or Form 5 | |
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| obligations may continue. See Instruction 1(b). | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 |

OMB APPROVAL OMB Number:

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| | | | | | or Sect | ion 30(n) or the r | nvesimer | it Con | ірапу Асі | OI TS | 940 | | | | | | |
|---------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|---------|-----------------------|-----------------|------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-----------------------------------------------|-------------------|-----------|---------------------------------------------------------------------------------------------------|-------|------------------------------------------------------------------------------------|----------------------|----------------------------------------------------------------|-----------------------------------------|------------|--|
| 1. Name and Address of Reporting Person* FINNERAN JOHN G JR (Last) (First) (Middle) 1680 CAPITAL ONE DRIVE | | | | | 2. Issuer Name and Ticker or Trading Symbol CAPITAL ONE FINANCIAL CORP [COF | | | | | | | Check all ap | | ng Person(s) to | Issuer Owner | | |
| | | | | - [] | J | | | | | | | | cer (give title | Oth belo | er (specify | | |
| | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/30/2020 | | | | | | | | | Senior Advisor and Corp Secy | | | |
| (Street) | | | | | 4. If Am | endment, Date o | f Original | Filed | (Month/Da | ay/Ye | ear) | | . Individual ine) | or Joint/Group | p Filing (Checl | Applicable | |
| MCLEAN VA 22102 | | | | | | | | | | | | | X For | m filed by On | e Reporting Po | erson | |
| (City) | (St | rate) (| Zip) | | - | | | | | | | | | Form filed by More than One Reporting Person | | | |
| | | Tabl | e I - Nor | -Deriv | ative Se | curities Acc | quired, | Disp | osed o | f, o | r Ben | eficia | ally Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transar Date (Month/Date | | | saction /Day/Year) | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (Disposed Of (D) (Instr. 3 5) | | | | | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Ownership | | | | |
| | | | | | | Code | v | Amount (A) or (D) | | Price | Trans | action(s) a and 4) | | (Instr. 4) | | | |
| Common Stock ⁽¹⁾ 01/30/ | | | | | 0/2020 | | A | | 8,453 | 3 | A | \$ | \$0 100,245 | | D | | |
| | | Та | | | | urities Acqu s, warrants, | , | | , | | | | y Owned | I | | | |
| 1. Title of Derivative Security (Instr. 3) | erivative Conversion Date Execution Date (Month/Day/Year) if any | | Date, | | Transaction of E Code (Instr. Derivative (| | e Exercisable and tion Date n/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | 8. Price of Derivative Security (Instr. 5) Benefic Owned Following Reporte Transar | | Ownershi Form: Direct (D) or Indirec (I) (Instr. 4 | Beneficial Ownership t (Instr. 4) | | |

Explanation of Responses:

1. This restricted stock unit award will vest in 1/3 increments beginning on February 15, 2021 and annually thereafter. Each restricted stock unit represents a contingent right to receive one share of Company common stock.

Date Exercisable

Expiration

Date

Remarks:

Cleo Belmonte (POA on file) 02/03/2020

(Instr. 4)

** Signature of Reporting Person Date

Amount or Number

of Shares

Title

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).

Code

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.

of (D) (Instr. 3, 4 and 5)

(A) (D)