FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* SCHNALL PETER A (Last) (First) (Middle)						Issuer Name and Ticker or Trading Symbol CAPITAL ONE FINANCIAL CORP [COF] Date of Earliest Transaction (Month/Day/Year) 01/31/2013								lelationship of Reporting Person(s) to Issuer eck all applicable) Director 10% Owner X Officer (give title other (specify below) Chief Risk Officer				ner
(Street) MCLEAN VA 22102 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					action	ar) i	2A. Deeme Execution f any	Deemed Date,		3. Transaction Code (Instr.		of, or Bei	d (A) or	5. Amou Securitie Benefici	nt of es ally Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				inisu. 4)
Common Stock ⁽¹⁾ 01/31/2						2013		A		17,942	2 A	\$0.000	00 207	7,085		D		
		-	Table II -									or Bene ble secu		Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis Expiration Date (Month/Day/Yea		е	7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares	per				
2013 Restricted Stock Units	\$0.0000(2)	01/31/2013			A		13,931		(3)		(3)	Common Stock	13,931	\$0.0000	13,931	1	D	
Restricted Stock Units	\$0.0000(2)	01/31/2013			A		12,665		12/15/20	13	12/15/2013	Common Stock	12,665	\$0.0000	12,665	5	D	
Stock Options	\$56.32	01/31/2013			Α		33,462		(4)		01/30/2023	Common Stock	33,462	\$0.0000	33,462	2	D	

Explanation of Responses:

- $1. This \ restricted \ stock \ will \ vest \ in \ 1/3 \ increments \ beginning \ on \ February \ 10, \ 2014 \ and \ annually \ thereafter.$
- 2. 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 twenty trading days preceding the vesting date.
- $3.\ These\ restricted\ stock\ units\ will\ vest\ in\ 1/3\ increments\ beginning\ on\ February\ 10,\ 2014\ and\ annually\ thereafter.$
- 4. This option becomes exercisable in 1/3 increments beginning on February 10, 2014 and annually thereafter.

This form is being filed to report the grants that the reporting person received on January 31, 2013 that were not reported due to an administrative error by the Company.

Gregory W. Seward (POA on file)

02/12/2013

** 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.