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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. 20549 |
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| Check this box if no longer subject | |
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| 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: 3235-0287 | | | | | | | | | |
| | Estimated average burden | | | | | | | | | |
| ı | 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* Borgmann Kevin S. (Last) (First) (Middle) 1680 CAPITAL ONE DRIVE (Street) MCLEAN VA 22102 (City) (State) (Zip) | | | | | | Issuer Name and Ticker or Trading Symbol CAPITAL ONE FINANCIAL CORP COF] 3. Date of Earliest Transaction (Month/Day/Year) 04/29/2021 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer Check all applicable) Director 10% Owner X Officer (give title Other (specify below) Senior Advisor to the CEO 6. 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-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yell) | | | | Year) i | Execution Date | | Transaction Code (Instr. | | action | 4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 | | | and 5) Securi Benefi | | cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | | v | Amount | (A) or (D) | Price | Tra | | action(s) 3 and 4) | | | (Instr. 4) |
| Common Stock ⁽¹⁾ 04/29/202 | | | | | | 21 | | | | | 7,145 | D | \$146.4 | 4 ⁽²⁾ 56 | | 56,856 | | D | |
| Common Stock ⁽¹⁾ 04/29/202 | | | | | | 21 | | | | | 9,633 | D | \$147.2 | 29 ⁽³⁾ 47 | | 47,223 | | D | |
| | | Tal | ole II | - Derivati (e.g., pu | | | | | | | osed of, convertib | | | | Owne | d | | | |
| Derivative Security (Instr. 3) Conversion or Exercise Price of Derivative Security Date (Month/Day/Year) (Month/Day/Year) Execution Date, if any (Month/Day/Year) Response of Derivative Security | | | saction e (Instr. 5. Numb of Derivati Securiti Acquire (A) or Dispose of (D) (Instr. 3, and 5) e V (A) (I | | vative irities iired r osed) r. 3, 4 | Expiration (Month/Day | | Year) Expiration | 7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4) Amoun or Numbe of Title Shares | | 8. Price of Derivative Security (Instr. 5) | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | | |

Explanation of Responses:

- 1. This transaction was executed pursuant to a trading plan entered into by the reporting person on January 28, 2021, in accordance with Rule 10b5-1 of the Securities Exchange Act of 1934, as amended.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$145.84 to \$146.82. Information regarding the number of shares sold at each price will be provided upon request.
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$146.87 to \$147.65. Information regarding the number of shares sold at each price will be provided upon request.

Remarks:

/s/ Cleo Belmonte (POA on

** Signature of Reporting Person

file)

05/03/2021

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.