Instruction 1(b).

FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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Check this box if no longer subject	STATEMENT OF CHANGES IN BENEFICIAL	<b>OWNERSHIP</b>
to Section 16. Form 4 or Form 5		
obligations may continue. See		

OMB APPROVAL 3235-0287 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

Name and Address of Reporting Person*     Haggerty Kaitlin					CAPITAL ONE FINANCIAL CORP [ COF ]										all applicable)  Director  Officer (give title		10% Ow Other (s		ner
(Last) 1680 CA	(Fir PITAL ON	,	/liddle)			3. Date of Earliest Transaction (Month/Day/Year) 02/15/2022									below) below) Chief Human Resources Officer				cer
(Street)  MCLEA  (City)			2102 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	lividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table	I - No	n-Deriva	ative S	Secu	rities	Acc	quired	, Dis	posed of	, or B	ene	ficially	y Own	ed			
				2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)				4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				5. Amo Securit Benefic Owned Report	ties Focially (DI Following (I)		m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
					Code	v	Amount	(A) o (D)	r Pr	ice	Transa	saction(s) r. 3 and 4)			(Instr. 4)				
Common	Common Stock 02				2022				F <sup>(1)</sup>		109	D	\$	158.89	5,419			D	
Common Stock 02/				02/15/2	:022				F <sup>(2)</sup>		120	D	\$	158.89	5,299			D	
Common	ommon Stock 02/15/20			.022	022			F <sup>(3)</sup>		121	D	\$	158.89	5	,178		D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed tion Date, n/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Da (Month/Day/N		ate	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ov Fo Dii or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amor or Num of Share	ber					

## **Explanation of Responses:**

- 1. Represents the automatic withholding by the issuer to satisfy the reporting person's tax obligation associated with the vesting of restricted stock units granted on January 31, 2019. This is authorized in the applicable restricted stock award agreement.
- 2. Represents the automatic withholding by the issuer to satisfy the reporting person's tax obligation associated with the vesting of restricted stock units granted on January 30, 2020. This is authorized in the applicable restricted stock award agreement.
- 3. Represents the automatic withholding by the issuer to satisfy the reporting person's tax obligation associated with the vesting of restricted stock units granted on February 4, 2021. This is authorized in the applicable restricted stock award agreement.

## Remarks:

/s/ Cleo Belmonte (POA on

file)

02/17/2022

\*\* 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.