FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	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 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* Zamsky Michael					2. Issuer Name and Ticker or Trading Symbol CAPITAL ONE FINANCIAL CORP COF									(Checl	tionship of Report all applicable) Director Officer (give title		10%		Issuer Owner (specify
(Last) 1680 CA	(Fi	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/11/2024								X	belov	below) Chief Credit &		below)	·
(Street) MCLEA	N VA	A 2	2102		4. If #	4. If Amendment, Date of Original Filed (Month/Day/Year)									Form Form	al or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson			
(City)	(St	ate) (2	Zip)		$ $ $ $ $ $ $ $	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										nded to			
		Table	I - No	n-Deriva	tive S	Secu	rities	Acc	uired	, Dis	posed of	, or B	enefi	cially	Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execu y/Year) if any		Deemed cution Date, y nth/Day/Year)		Transaction Dispose Code (Instr. 5)		Disposed O	ies Acquired (A) Of (D) (Instr. 3,			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount	(A) oi (D)	r Price	CO Trai		action(s) 3 and 4)			(111511. 4)			
Common	Stock		03/11/2024 A ⁽¹⁾ 4,998 A \$0						39	39,278		D							
Common	Stock		03/11/2024 F ^C					F ⁽²⁾		2,255	D	\$13	8.46	37,023			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)	ive Conversion Date Execution Date, y or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. 8)		5. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instrand £	rities pired r osed) 1. 3, 4	Expiration D		ate	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Dei Sec (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

- 1. These shares were earned pursuant to a performance share award agreement granted on February 4, 2021, as amended on November 2, 2023, based on the Company's Common Dividends + Growth of Tangible Book Value per Share and Adjusted ROTCE against a peer group of companies over a three-year performance period. These shares represent the number of shares paid out based on actual performance plus the dividend shares accrued under the same grant.
- 2. These shares were automatically withheld by the Company to satisfy the reporting person's tax obligation associated with the settlement of the performance shares. This share withholding was authorized in the performance share award agreement.

Remarks:

/s/ Jason S. Frank (POA on

03/13/2024

** 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.