CAPITAL ONE FINANCIAL CORP

Form 5

February 14, 2006

Reported

FORM 5 **OMB** UNITED STATES SECURITIES AND EXCHANGE COMMISSION 3235-0362 Number: Washington, D.C. 20549 Check this box if January 31, Expires: no longer subject 2005 to Section 16. Estimated average ANNUAL STATEMENT OF CHANGES IN BENEFICIAL Form 4 or Form burden hours per 5 obligations OWNERSHIP OF SECURITIES response... 1.0 may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940 Form 4 Transactions

1. Name and Address of Reporting Person * 2. Issuer Name and Ticker or Trading 5. Relationship of Reporting Person(s) to Issuer **BOYDSTUN J HERBERT** Symbol CAPITAL ONE FINANCIAL CORP (Check all applicable) [COF] (Middle) 3. Statement for Issuer's Fiscal Year Ended (Last) (First) Director 10% Owner X_ Officer (give title Other (specify (Month/Day/Year) below) below) 12/31/2005 Executive Vice President 1680 CAPITAL ONE DRIVE (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Reporting Filed(Month/Day/Year) (check applicable line)

MCLEAN, VAÂ 22102

X Form Filed by One Reporting Person Form Filed by More than One Reporting

OMB APPROVAL

(City)	(State)	(Zip) Tabl	le I - Non-Der	ivative Se	curitie	es Acquir	ed, Disposed of	, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securi (A) or D (Instr. 3,	(A) or	d of (D)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	12/22/2005	Â	G	750	D	\$ 87.61	37,179	D	Â
Common Stock	12/22/2005	Â	G	9,700	D	\$ 87.61	27,479	D	Â
Common Stock	12/28/2005	Â	G	1,091	D	\$ 86.68	26,388	D	Â
Common Stock	12/30/2005	Â	G	285	D	\$ 86.3	26,103	D	Â

Edgar Filing: CAPITAL ONE FINANCIAL CORP - Form 5

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.			Person contain the for	SEC 2270 (9-02)					
Common Stock	Â	Â	Â	Â	Â	Â	1,077	I	By ESOP account (1)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D	ate	Amou	int of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)
	Derivative				Securities			(Instr.	3 and 4)	
	Security				Acquired					
					(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
									Amount	
									or	
						Date	Expiration	Title	Number	
						Exercisable	Date	Title	of	
					(A) (D)				Shares	
					(Λ) (D)				Shares	

of D

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
BOYDSTUN J HERBERT 1680 CAPITAL ONE DRIVE MCLEAN, VA 22102	Â	Â	Executive Vice President	Â				

Signatures

By: Frederick L. Williams (POA on file) for

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).
- (1) Represents the number of shares beneficially owned by the reporting person through his Hibernia Employee Stock Ownership Plan ("ESOP") account held by such plan's record keeper for Capital One.

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners 2