FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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 OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(11mt of Ty	pe Response:	3)													
1. Name and Address of Reporting Person* PORTEOUS DAVID L				2. Issuer Name and Ticker or Trading Symbol HUNTINGTON BANCSHARES INC/MD [HBAN]						_X_ Direc	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director Officer (give title below) Other (specify below)				
(Last) (First) (Middle) P.O. BOX 206				3. Date of Earliest Transaction (Month/Day/Year) 01/26/2010											
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ Form fil	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City	ITY, MI 4	96 / / (State)	(Zip)				.	5		•.•			m . u . o		
				124	Daamad		Non-	1			Acquired, Disp	•	6.		of
1.Title of Security (Instr. 3)		Date (Month/Day/Year) Ex		Deemed 3. Transaction Code (Instr. 8)		(Instr. 3, 4 and 5)			S. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Ownershi Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						Code	V	Amount	(A) or (D)	Price			(I) (Instr. 4)	(mstr. 1)	
Common	Stock		01/26/2010			P		20,500	A	\$ 4.92	402,437		D		
Common Stock		01/26/2010			A		8,478	A	\$ 4.60	63,251		I	By Issuer's Deferred Compensation Plan for Huntington Bancshares Incorporated Directors		
Common Stock										100,807		I	By Chi	By Children	
Common	Stock										9,622		I	By Spo	use
Reminder:	Report on a s	separate lin	e for each class	ole II - D		rities Acc	F c t	Persons ventained the form of	who re I in th displa d of, o	is forn ys a c r Benef	d to the collen are not requ urrently valid ficially Owned ties)	ired to resp	ond unless	SEC 14'	74 (9-02)
1. Title of		3. Transac		eemed	4.	5.		6. Date Ex	ercisat	ole	7. Title and	8. Price of 9		10.	11. Natur
Security	Conversion or Exercise Price of Derivative Security		ay/Year) any	Execution Date, if any Code (Instr. 8) Execution Date, if Code (Month/Day/Year) (Month/Day/Year) Execution Date, if Code of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		r)	Amount of Underlying Securities (Instr. 3 and 4)	C F R T	Securities Seneficially Owned Following Reported Fransaction(s)	Derivative Security: Direct (D) or Indirect	Beneficia				
					Code	V (A)		Date Exercisabl		iration	Amount or Number of Shares				

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		

PORTEOUS DAVID L			
P.O. BOX 206	X		
REED CITY, MI 49677			

Signatures

Elizabeth B. Moore	01/27/2010
**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).

Note: File three copies of this Form, one of which must be manually signed. If space 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.