FORM 4

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

OMB APPROVAL
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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

(Print or Ty	pe Response	s)													
1. Name and Address of Reporting Person * Dunlap James E				HU	2. Issuer Name and Ticker or Trading Symbol HUNTINGTON BANCSHARES INC/MD [HBAN]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below)				
(Last) (First) (Middle) HUNTINGTON CENTER, 41 S. HIGH STREET					3. Date of Earliest Transaction (Month/Day/Year) 02/26/2010							Regional	Banking Grou	p Pres.	
(Street) COLUMBUS, OH 43287				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ Form fi	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person			
(City		(State)	(Zip)			Table I - I	Non-	Derivativo	e Securi	ities A	Acquired, Disp	osed of, or Be	eneficially Ow	ned	
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Yea	r) any		3. Transacti Code (Instr. 8)	on	4. Securi (A) or D (D) (Instr. 3,	isposed	of	d 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 6. Ownership Form: Direct (D) or Indirect		/	ial hip	
							V	Amount	(A) or (D)	Price			(I) (Instr. 4)		
Common	Stock		02/26/2010			A		806 (1)	A	\$ 0	77,161		D		
Commor	ı Stock										35,620		I	By Issu Investr and Ta Saving (401(k	ment x ss Plan
Commor	ı Stock										9,063		I	By Issa Supple Stock Purcha Tax Sa Plan	emental ase and
Common	Stock										8,203		I	by Tru	st
Reminder:	Report on a s	separate line	e for each class of s	II - Deriv	ative Secu		P co th	ersons vontained ne form o	who res in this lisplay	forms a cu	d to the colle n are not req urrently valid ficially Owned ties)	uired to resp d OMB contro	ond unless		74 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Executio ay/Year) any	ned n Date, if	4. Transactic Code (Instr. 8)	5. Number of Derivati Securiti Acquire (A) or Dispose of (D) (Instr. 3 4, and 5	es dd dd dd If	Date Exo nd Expira Month/Da	ercisable tion Dat y/Year)	e te	7. Title and Amount of Underlying Securities (Instr. 3 and 4) Amount or Title of Shares	(Instr. 5) F C F F T C C C C C C C C C	Derivative Securities Beneficially Dwned Following Reported	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Natur of Indirec Beneficia Ownersh (Instr. 4)

Reporting Owners

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

Dunlap James E			
HUNTINGTON CENTER		Regional Banking Group Pres.	l
41 S. HIGH STREET		Regional Banking Gloup Fies.	ĺ
COLUMBUS, OH 43287			ĺ

Signatures

Elizabeth B. Moore	03/02/2010
***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).
- These are shares of restricted stock that are 100% vested; however, they may not be sold, transferred, pledged, assigned, or otherwise disposed of until the later to occur of (1) (1) or (2): (1) The date that is six months after the payment date; or (2) the earliest to occur of the following events: (A) 6 months after the repayment of any loan issued to the company under the Troubled Asset Relief Program ("TARP"), (B) January 1, 2012, or (C) a change in control of the company.

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.