## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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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 * NAVARRO MARY W			HU	2. Issuer Name and Ticker or Trading Symbol HUNTINGTON BANCSHARES INC/MD [HBAN]						Direc	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)  Director X Officer (give title below) Other (specify below)  Sr EVP of Principal Sub						
(Last) (First) (Middle) HUNTINGTON CENTER, 41 S. HIGH STREET				3. Date of Earliest Transaction (Month/Day/Year) 05/28/2010							Sr EV	/ P 01 P1	rincipal S	шь			
(Street)				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 Person Form filed by More than One Reporting Person					
(City	BUS, OH	(State)		(Zip)			Tabla I	Non	Dorivativa	Saguri	tios A o						
1.Title of Security (Instr. 3) 2. Transaction Date		ansaction 2A Exc nth/Day/Year) any		2A. Deemed Execution Date, if		ction 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		uired of	cquired, Disposed of, or Benef  5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		owing	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature Indirect Benefici Ownersh	7. Nature of Indirect Beneficial Ownership		
Commor	Stock		05/28/2	2010			Code	· V	Amount 622 (1)	` '	Price \$ 0	82,660			(Instr. 4)		
Commor			00/20/2				11		022	. 1		13,629		1	[	By Issu Investr and Ta Saving (401(k	ment x s Plan
Commor	ı Stock											2,055		]	Í	By Issu Supple Stock Purcha Tax Sa Plan	emental ase and
Reminder:	Report on a s	separate line	e for each		- Deriv	ative Secur	rities Ac	quire	Persons w contained the form d	ho res in this isplays	form a cui	to the colle are not req rrently valid	uired to res I OMB cont	pond	unless	SEC 14'	74 (9-02)
1. Title of Derivative Security (Instr. 3)	2. 3. Transaction Conversion or Exercise Price of Derivative Security (Month/Day.		otion 3A. Deemed 4. Execution Date, if Transaction		5. Number		6. Date Exercisable and Expiration Date (Month/Day/Year)		7 e A U S	7. Title and Amount of Underlying Securities Instr. 3 and	(Instr. 5) B C F R T	Deriva Securit Benefi Owned Follow	rivative (curities Ineficially Inved Illowing ported ensaction(s)	Ownership of Indirect (D) r Indirect (D)	Beneficial		
	Security						Dispo of (D (Instr	sed ) . 3,				Amount		Transa (Instr.	ction(s)	(I) (Instr. 4)	

### **Reporting Owners**

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

	NAVARRO MARY W HUNTINGTON CENTER 41 S. HIGH STREET COLUMBUS, OH 43287			Sr EVP of Principal Sub		
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#### **Signatures**

Elizabeth B. Moore	06/02/2010
**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.