## 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* HILLIKER D JAMES				2. Issuer Name and Ticker or Trading Symbol HUNTINGTON BANCSHARES INC/MD [HBAN]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_Director Officer (give title below) Other (specify below)							
(Last) (First) (Middle) HUNTINGTON CENTER, 41 S. HIGH STREET				3. Date of Earliest Transaction (Month/Day/Year) 10/25/2010														
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person							
COLUMBUS, OH 43287 (City) (State) (Zip)			Table I. Non Desirative Consulting According						l comi	uired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)		Date Exe (Month/Day/Year) any		Deemed 3. cution Date, if Trans		ransaction		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. A Ber Fol Tra	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Chen	6. Ownership Form: Direct (D)	7. Nature Indirect Beneficia	7. Nature of	
							Code	V	Amount (D) Price (Insu		note. 5 and 4)		(I) (Instr. 4)	(msu. 4)				
Common	Stock		10/25/2010				A		3,018	A	\$ 5.7159	39	,530			I	By Issuer's Deferred Compensation Plan for Huntington Bancshares Incorporated Directors	
Common	Stock											13	9,978			D		
Common	Stock											7,6	540			I	By Sky Qualific Retirem Plan	ed
Common	Stock											7,7	783			I	By Wif	e
Reminder:	Report on a	separate li	ne for each cla	Γable II -	rities beneficia	curi	ties Acq	uire	Persons containe the form d, Dispos	who d in t displ	his forn lays a c	n are urrer ficiall	not requ	ction of info ired to res OMB cont	pone	d unless	SEC 147	74 (9-02)
Security	Conversion		Exe Day/Year) any	Deemed ecution Da	4.	ction	5.	er tive cies sed ed ed 3,	6. Date Exercisable and Expiration Date (Month/Day/Year)  Control of the control		7. Ti Amo Undo Secu (Inst 4)	Amount or Number of Shares	(Instr. 5)	Deriv Secu Bene Own Follo Repo	vative rities eficially ed owing orted saction(s)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirec Beneficial Ownershi (Instr. 4)	

### **Reporting Owners**

	Relationships
Reporting Owner Name /	

Address	Director	10% Owner	Officer	Other
HILLIKER D JAMES HUNTINGTON CENTER 41 S. HIGH STREET COLUMBUS, OH 43287	X			

#### **Signatures**

Elizabeth B. Moore	10/26/2010
**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.