FORM 4	4
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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).	

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

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

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

			2. Issuer Nam HUNTINGT [HBAN]			0	-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_Director10% Owner Officer (give title below)Other (specify below)				
(Last) P.O. BOX 206	(First)	(Middle)	3. Date of Earlie 05/01/2013	3. Date of Earliest Transaction (Month/Day/Year) 05/01/2013								
REED CITY, MI 4	(Street)		4. If Amendmer	4. If Amendment, Date Original Filed(Month/Day/Year)					_X_Form filed by One Reporting P	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)	(State)	(Zip)		Table I - N	Non-	Derivative	e Secur	ities A	cquired, Disposed of, or Benef	icially Owne	ed	
(Instr. 3) Date		Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code	on	(A) or Disposed of Be (D) Re			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Form: Direct (D)	Beneficial Ownership	
				Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(instr. 4)	
Common Stock		05/01/2013		А		10,269 (1)	А	\$ 0	511,866	D		
Common Stock									43,589	Ι	By Children	
Common Stock									128,725	Ι	By Issuer's Deferred Compensation Plan for Huntington Bancshares Incorporated Directors	
Common Stock									9,622	Ι	By Spouse	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1474 (9-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.	5	5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	n l	Numb	ber	and Expirati	on Date	Amou	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	C	of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	I	Deriv	ative			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				S	Secur	ities			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				A	Acqui	ired			4)			Following	Direct (D)	
					((A) 01	r						Reported	or Indirect	
					Ι	Dispo	sed						Transaction(s)	(I)	
					C	of (D))						(Instr. 4)	(Instr. 4)	
					(Instr.	. 3,								
					4	1, and	15)								
											Amount				
											or				
									Expiration		Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				

Reporting Owners

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

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

Elizabeth B. Moore	05/03/2013	
**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) An award of deferred stock units to be released in shares six months following separation of service.

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.