## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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* CASTO DON M III				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)  _X_ Director 10% Owner Officer (give title below) Other (specify below)						
(Last) (First) (Middle) CASTO, 191 WEST NATIONWIDE BLVD.					3. Date of Earliest Transaction (Month/Day/Year) 10/26/2009													
(Street)				4. Ii	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							
(City)	BUS, OH	(State)	(Zip)			Table I	Non	Dowinatio	o Coon	witios A	\ aani	and Dien	asad of an Pa	anafiaiall	· Own	and and		
1.Title of Security (Instr. 3)		2. Transaction 2A Ex (Month/Day/Year) any		emed	3. Transaction Code		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		oving 6.  Owr  Form  Dire	nership n: ct (D)	7. Nature of				
						Code	V	Amount	(A) or (D)	Price				(I)			(msu. 1)	
Common	ommon Stock 10/2		10/26/2009			A		5,623	A	\$ 4.09	95,9	95,908		I		By Issuer's Deferred Compensation Plan for Huntington Bancshares Incorporated Directors		
Common	Stock										220	,362		D				
Common	Stock										50,9	984		I		By Issu Deferre Comper Plan for Director	d nsation	
Common	Stock										11,7	779		I		By Wife	e	
Reminder: 1	Report on a s	separate lind	e for each class of so	I - Deriv	vative Secu	rities Acq	F c t	Persons vontained he form	who re I in thi display	is forn ys a c r Benef	n are urren ficiall	not requ itly valid	ction of info uired to resp OMB contr	pond un	less	SEC 147	74 (9-02)	
1. Title of	2	3. Transac	tion 3A. Deem		puts, calls,	warrants						tle and	8. Price of	9 Numbe	r of	10.	11. Naturo	
Derivative Security	Conversion	Date	ay/Year) (Month/D	Date, if	Code	5. Number of Derival Securit Acquir (A) or Dispos of (D) (Instr. 24, and 25)	r a dive ies ed ed ed 8,	nd Expiration Date Month/Day/Year)  Ar Ur Se (Ir		Amo Unde Secur	mount of inderlying securities instr. 3 and in the inderlying security (Instr. 5)  Derivative Security (Instr. 5)  Bene Own Follo Repo		Derivative Securities Beneficial Owned Following Reported	vative rities Form of Derivative d Security: Direct (Dorted saction(s) (I)		of Indirec Beneficia Ownershi (Instr. 4)		
					Code V	V (A) (	]	Date Exercisabl		iration	Title	Amount or Number of Shares						

### **Reporting Owners**

Relationships

Reporting Owner Name / Address	Director	10% Owner	Officer	Other
CASTO DON M III CASTO 191 WEST NATIONWIDE BLVD. COLUMBUS, OH 43215	X			

# **Signatures**

Elizabeth B. Moore	10/27/2009
**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.