## FORM 4

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

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

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 * Heller Paul G				2. Issuer Name and Ticker or Trading Symbol HUNTINGTON BANCSHARES INC/MD [HBAN]								'MD	-	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)  Director X Officer (give title below)  Sr. EVP & Chief Technology and					
(Last) (First) (Middle) HUNTINGTON CENTER, 41 S. HIGH STREET				3. Date of Earliest Transaction (Month/Day/Year) 02/27/2013								r)			Sr. Evr e	Chief Tech	nology and		
(Street) COLUMBUS, OH 43287				4. If Amendment, Date Original Filed(Month/Day/Year)								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)			Ta	ble I	- Nor	ı-Der	ivative	Secur	ities A	Acqui	red, Dispo	osed of, or I	Beneficially	Owned		
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)			(Instr. 8)		ction	4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5)		f (D)	Beneficial	ount of Securities cially Owned Following ed Transaction(s) 3 and 4)			of India Benefic Owner	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							C	ode	V	Amour		Ď) I	Price				(Instr. 4)		
Common Stock 02/27/2		02/27/2013					P		10,00	$0 A \qquad \begin{array}{c} \$ \\ 6.82 \end{array}$			104,786		D				
Keimidel.	Report on a s	reparate file fo	or each class of secur Table II -		•				Pers cont the f	ons what ained it form dis	no re in this splay	s forr /s a c	m are currer	not requ ntly valid		ormation spond unle rol numbe	ss	1474 (9	9-02)
1 7711 6	l <sub>a</sub>	2 77 .:			uts, calls,			ts, op					1		0 D : 0	0.37 1	6 10	1	NT .
1. Title of Derivative Security (Instr. 3) Price of Derivativ Security		3. Transactio Date (Month/Day/	Year) Execution Da	te, if Transaction Code (Instr. 8)		on I	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		Amo Unde Secu		Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form o Derivat Securit Direct ( or Indi	ship of I f Ber ive Ow (Ins D)	. Naturo Indirec meficia vnershi istr. 4)		
					Code	V	(A)	(D)	Date Exer	e cisable	Expi Date	ration	Title	Amount or Number of Shares					

### **Reporting Owners**

D (1 0 N /	Relationships							
Reporting Owner Name / Address	Director 10% Owner		Officer	Other				
Heller Paul G HUNTINGTON CENTER 41 S. HIGH STREET COLUMBUS, OH 43287			Sr. EVP & Chief Technology and					

### **Signatures**

Elizabeth B. Moore	03/01/2013
**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).

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.