FORM 4	4
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Check this box if no	Ī
longer subject to	
Section 16. Form 4 or	
Form 5 obligations	
may continue. See	
Instruction 1(b).	

(Drint or Type Dec

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

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### 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 Type Responses)										
1. Name and Address of Reporting Pe McCullough Howell D. III	ame and Address of Reporting Person <sup>*</sup> 2. Issuer Name and Ticker or Trading Symbol         Cullough Howell D. III       HUNTINGTON BANCSHARES INC/MD         [HBAN]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director10% Owner Officer (give title below)Other (specify below)			
(Last) (First) HUNTINGTON CENTER, 41 STREET	(Middle) S. HIGH	3. Date of Earliest Transaction (Month/Day/Year) 02/01/2016					CFO & Sr E	VP		
(Street) 4. If Amendment, Date Origi COLUMBUS, OH 43287			inal I	Filed(Month	/Day/Yea	ar)	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 - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)	Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)	ction	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A)		of (D)	5. Amount of Securities     6.     7. Nat       Beneficially Owned Following     Ownership     of Ind       Reported Transaction(s)     Form:     Beneficially       (Instr. 3 and 4)     Direct (D)     Owne       or Indirect     (Instr.     (Instr.		
			Code	v	Amount	or (D)	Price		(I) (Instr. 4)	()
Common Stock	02/01/2016		Р		25,000	А	\$ 8.6048	260,045	D	

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

Persons who respond to the collection of information SEC 1474 (9-02) 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.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	on 1	Numb	ber	and Expirati	on Date	Amou	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day	/Year)	Unde	rlying	Security			Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	]	Deriv	ative			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secur				(Instr	. 3 and			2	(Instr. 4)
	Security					Acqui				4)			0	Direct (D)	
						(A) 01							1	or Indirect	
						Dispo							Transaction(s)	< / <	
						of (D)							(Instr. 4)	(Instr. 4)	
						(Instr	· · · ·								
					4	4, and	15)				-				
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
								Excicisable	Duit		of				
				Code	V	(A)	(D)				Shares				

### **Reporting Owners**

	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
McCullough Howell D. III HUNTINGTON CENTER 41 S. HIGH STREET COLUMBUS, OH 43287			CFO & Sr EVP						

## Signatures

Elizabeth B. Moore	02/01/2016
**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.