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* Dunlap James E				Н	2. Issuer Name and Ticker or Trading Symbol HUNTINGTON BANCSHARES INC/MD [HBAN]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X Officer (give title below) Other (specify below) Regional Banking Group Pres.						
(Last) HUNTIN STREET	GTON C	(First) ENTER,	(Middle) 41 S. HIGH		Date of Ear 1/20/2016		st Transa	ctio	n (Month/E	ay/Ye	ear)			Regional	Dank	ing Group	Ties.	
(Street) COLUMBUS, OH 43287				4.	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)			T	able I -	Non	-Derivativ	e Seci	ırities A	Acqui	ired, Dispo	osed of, or B	Senefic	cially Owi	ied	
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye			Execu	Deemed 3. Transaction Code (Instr. 8)					Be Re	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Form: Direct (D or Indirect	Benefici	al nip				
							Code	V	Amount	or	Price	,				(I) (Instr. 4)		
Common	Stock		04/20/2016				A		51,168	A	\$ 0	35	50,230			D		
Common	Stock		04/20/2016				F		18,210	D	\$ 10.23	8 33	32,020			D		
Common	Stock											24	1 ,781			I	By Issu Investr and Ta Saving (401(k	nent x s Plan
Common	Stock											55	5,494			I	By Issu Supple Stock Purcha Tax Sa Plan	mental se and
Common	Stock											40),456			I	By Spo	ouse
Common	Stock											8,	203			I	by Tru	st
Reminder: 1	Report on a s	separate lin	e for each class of s	ecuritie	s beneficial	y o	owned di	ļ	Persons v contained	who r I in th	is forn	n are	not requ	ction of info ired to res OMB cont	pond	unless	SEC 14'	74 (9-02)
			Table		ivative Sec , puts, calls								ly Owned					
1. Title of Derivative Security 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date Execution Date, is any (Month/Day/Year)		Code	e of		ive ies ed ed	6. Date Exercisable and Expiration Date (Month/Day/Year)		Amo Und Secu	itle and bount of erlying urities tr. 3 and	Owne Follo Repo		ative ities ficially ed wing rted action(s)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	Beneficial				
					Code	V	(A) (D)	Date Exercisabl		oiration ee	Title	or Number of Shares					

P. (1. 0. N. /	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Dunlap James E HUNTINGTON CENTER 41 S. HIGH STREET COLUMBUS, OH 43287			Regional Banking Group Pres.					

Signatures

Elizabeth B. Moore	04/22/2016
**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.