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 * RANSIER KATHLEEN H					Н	2. Issuer Name and Ticker or Trading Symbol HUNTINGTON BANCSHARES INC/MD [HBAN]							_X_ Di	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_Director Officer (give title below) Other (specify below)				
(Last) (First) (Middle) VORYS, SATER, SEYMOUR AND PEASE LLP, P.O. BOX 1008					-	3. Date of Earliest Transaction (Month/Day/Year) 07/27/2016												
(Street) COLUMBUS, OH 43216-1008				4.	4. If Amendment, Date Original Filed(Month/Day/Year)							_X_ Forn	6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City) (State) (Zip)					Table I - Non-Derivative Securities Acqui						Acquired, Di	lired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)		Date Exe (Month/Day/Year)		Executi any	ecution Date, if		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securitie Beneficially Owned Following Reported Transaction(s)		Owner Form: Direct	Ownership Form: Direct (D)		.1	
							ode	V	Amount	(A) or (D)	Price	(Instr. 3 ar	(Instr. 3 and 4)		or Indirect (Inst. (Inst. 4)			
Common Stock		07/27/2016					A		1,353	A	\$ 9.4981	34,651	4,651			By Issuer's Deferred Compensation Plan for Huntington Bancshares Incorporated Directors		
Common Stock													103,422		Г)		
Common Stock												1,500		I		By Spo	use	
Reminder:	Report on a	separate li	ne for each							Persons containe the form	who d in t	this forn lays a c	n are not re urrently va	lection of inf equired to res lid OMB conf	spond (unless	SEC 147	74 (9-02)
				Table		ivative Sec , puts, calls							ficially Own ties)	ed				
Security	Conversion		Day/Year) Execution any		ned n Date, i	4. Transactic Code (Instr. 8)		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivat Securit Benefic Owned Follow Reporte	tive ties cially d ving ed ction(s)	Derivative Security: Direct (D) or Indirect	Beneficial	
						Code	V	(A)	(D)	Date Exercisal		xpiration ate	Amou or Title Numb of Share	per				
Danar	ting O	XXIDAY	•6															

Reporting Owners

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

Signatures

Elizabeth B. Moore	07/28/2016
**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.