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 Type	e Response	s)															
1. Name and Address of Reporting Person *- PORTEOUS DAVID L			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 Officer (give title below) Other (specify below)						
P.O. BOX	(Last) (First) (Middle) P.O. BOX 206				3. Date of Earliest Transaction (Month/Day/Year) 01/25/2018												
			4. If	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							
REED CIT	ΓΥ, MI 4														7 8		
(City)	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
1.Title of Security (Instr. 3)		Date (Month/Day/Year) Exe		, Co		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securit Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Owned ported)		Form: Direct (D)	7. Nature p Indirect Beneficia Ownersh t (Instr. 4)	al ip	
						Code	V	Amount	or (D)	Price					(I) (Instr. 4)		
Common S	Stock		01/25/2018			A		1,579	A	\$ 16.15	7,7	798			I	Directo Deferre Comper Plan	ed
Common S	Stock										552	2,994			D		
Common S	Stock										193	3,566			I	By Issu Deferre Compe Plan for Hunting Bancsh Incorpo Directo	ed nsation r gton ares orated
Common S	Stock										9,6	522			I	By Spo	use
Reminder: R	eport on a s	separate lin	e for each class of s	II - Deriv	rative Secu	rities Acc	quire	Persons contained he form	who ro	nis form ays a c or Bene	n are urrer ficiall	not requ ntly valid	ction of info uired to res OMB cont	pond	d unless	SEC 14'	74 (9-02)
		1			puts, calls,												1
(Instr. 3) F	Conversion		Execution any	Date, if	4. Transactio Code (Instr. 8)	5. Numb of Deriva Securi Acqui (A) or Dispos of (D) (Instr. 4, and	er ative ties red sed	and Expir	nd Expiration Date Month/Day/Year) Am Unc Sec		Amo Undo Secu (Inst	curities str. 3 and (Instr. 5) Ben Own Foll Rep Trar		Deriv Secur Bene: Owne Follo Repo	vative rities ficially ed owing orted saction(s)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	Beneficial
					Code	V (A)		Date Exercisab		oiration te	Title	Amount or Number of Shares					

Reporting Owners

	Relationships
Reporting Owner Name /	

Address	Director	10% Owner	Officer	Other
PORTEOUS DAVID L P.O. BOX 206 REED CITY, MI 49677	X			

Signatures

Elizabeth B. Moore	01/26/2018
**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.