## 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 * Thompson Mark E				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)  Director X Officer (give title below)  Other (specify below)						
(Last) (First) (Middle) HUNTINGTON CENTER, 41 S. HIGH STREET					3. Date of Earliest Transaction (Month/Day/Year) 02/28/2018								Senior 1	EVP (	of Principa	l Sub.		
(Street) COLUMBUS, OH 43287				4. If	4. If Amendment, Date Original Filed(Month/Day/Year)							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)		r	Table I -	Non-	Derivativ	e Secu	rities A	Acquir	red, Disp	osed of, or I	Benef	icially Ow	ned	
1.Title of Security (Instr. 3)		2. Trans Date (Month	saction /Day/Year)	Executi any	A. Deemed 3. Transaction Code (Instr. 8)			4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)  (A) or			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		wing	Form: Direct (D or Indirec (I)	Beneficia Ownersh	al ip		
Commor	1 Stock		02/28/	/2018			Code	V	Amount 3,380	(D)	Price \$ 0	548	,760			(Instr. 4)		
		02/28/	/2018					3,551 (2)	D	\$ 15.7	545,209		D					
Commor	n Stock								12)		13.7	14,6	595			I	By Exe Deferre Compe Plan	ed
Common	ı Stock											65,3	364			I	By Issu Investm and Tax Savings (401(k)	nent x s Plan
Commor	ı Stock											18,6	591			I	By Issu Suppler Stock Purchas Tax Sar Plan	mental se and
Reminder:	Report on a s	separate line	e for each					P c th	ersons v ontained ne form o	vho re l in thi displa	is forn ys a c	n are urren	not requ tly valid	ction of inf uired to res OMB conf	spon	d unless	SEC 14'	74 (9-02)
1 774 6	l <sub>a</sub>	2 7			(e.g., )	ative Secur puts, calls, v	warrants	, opti	ons, conv	ertible	securi	ties)			0.31	1 6	10	11.31.
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  Security  3. Transaction Date (Month/Day/Yet)			Execution Date,		Code	Number a		• /			Amor Unde Secur	curities str. 3 and (Instr. 5) Ben Ow Foll Rep Trai		Deri Secu Bene Own Follo Repo Tran	ivative Curities F eficially E eficially owing Corted consaction(s)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirec Beneficial Ownershij (Instr. 4)	
									Date Exercisable		iration	Title	Amount or Number					

Shares

### **Reporting Owners**

P ( 0 N /	Relationships								
Reporting Owner Name / Address	Director 10% Owner O		Officer	Other					
Thompson Mark E HUNTINGTON CENTER 41 S. HIGH STREET COLUMBUS, OH 43287			Senior EVP of Principal Sub.						

### **Signatures**

Elizabeth B. Moore	03/02/2018
***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).
- (1) An award of restricted stock units that vests in shares of common stock in three equal annual increments beginning on the first anniversary of the date of grant.
- (2) Shares were withheld to cover the associated tax liability upon the vesting of a previously granted award of RSUs.

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.