FORM 4

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

OMB APF	PROVAL
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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 Type Response	s)																	
1. Name and Address of Reporting Person* Harmening Andrew J				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 10% Owner						
(Last) (First) (Middle) HUNTINGTON CENTER, 41 S. HIGH STREET					3. Date of Earliest Transaction (Month/Day/Year) 05/01/2019							X Officer (give title below) Other (specify below) Sr. EVP of Principal Sub.						
(Street) COLUMBUS, OH 43287				4. If Amendment, Date Original Filed(Month/Day/Year)								_X_ Form file	6. Individual or Joint/Group FilingCheck Applicable Line) X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)		(Zip)				Ta	ble I	- Non-	Derivative	Securitie	s Acq	uired, Dispo	sed of, or l	Beneficially	Owned		
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		(Instr.		tion	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Own Following Reported Transaction(s) (Instr. 3 and 4)		s) (Ownership Form:	Beneficial		
				(Month/Da	ıy/Y	ear) Co	ode	V	Amount	(A) or (D)	Price	C		Direct (D) or Indirect I) Instr. 4)	Ownership (Instr. 4)		
Common Stock			05/01/2019				A	A		22,875 (1)	A	\$ 0	92,774			1	0	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise	3. Transaction Date (Month/Day/Yea	3A. Deemed Execution Da	(6	e.g., puts, 4.	call		quire s, op r of	ed, Disp tions, c 6. Dat Expira	oosed of, or convertible the Exercisal that the Exe	Benefici securities	oer. · ally O		Amount	8. Price of	9. Number of Derivative Securities	f 10. Ownersl Form of	
	-		3A. Deemed	(6	e.g., puts, 4.	call	s, warrant 5. Numbe	s, op r of	6. Dat	onvertible e Exercisab	securities		7. Title and					
	Price of Derivative Security		(Month/Day/	Year	(Instr. 8)	Acquired or Dispose (D) (Instr. 3, 4 and 5)	ed of					(Instr. 3 and 4)		(Instr. 5)	Beneficially Owned Following Reported Transaction	Security: Direct (I or Indire	(Instr. 4)
					Code	V	(A)	(D)	Date Exerc	isable	Expiration Date	on	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Employee/Director Stock Option (Right to Buy)	\$ 13.77	05/01/2019			A		164,921		05/0	1/2020 ⁽²⁾	05/01/2	2029	Common Stock	164,921	\$ 0 (3)	164,921	D	
Employee/Director Stock Option (Right to Buy)	\$ 13.09								05/0	01/2018	05/01/2	2027	Common Stock	40,035		40,035	D	
Employee/Director Stock Option (Right to Buy)	\$ 14.81								05/0	01/2019	05/01/2	2028	Common Stock	116,279		116,279	D	

Reporting Owners

Describer O. and Name /	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Harmening Andrew J HUNTINGTON CENTER 41 S. HIGH STREET COLUMBUS, OH 43287			Sr. EVP of Principal Sub.					

Signatures

Elizabeth B. Moore	05/03/2019
**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, to be released in shares of common stock, that vests in two equal installments: 50% on the third anniversary of the date of grant and 50% on the fourth anniversary of the date of grant.

- (2) The options become exercisable in 4 equal annual increments beginning on the first anniversary of the date of grant. The date reported is the first anniversary when a portion of the options first become exercisable.
- ($\bf 3$) These options were awarded under the Issuer's equity compensation plan.

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.