

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

OMB APPROVAL				
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nours per respons	e 0.5			

INITIAL STATEMENT OF 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 Responses)								
Name and Address of Reporting Person* Wasserman Zachary Jacob	2. Date of Event Requiring Statement (Month/Day/Year) 11/04/2019				3. Issuer Name and Ticker or Trading Symbol HUNTINGTON BANCSHARES INC/MD [HBAN]			
(Last) (First) (Middle) HUNTINGTON CENTER, 41 S. HIGH STREET			Issuer	(Check all applicable)		Filed(Month/Day/Year)		
(Street) COLUMBUS, OH 43287				X Officer (give t	X_ Officer (give title Other (spec		6. Individual or Joint/Group Filing(Check Applicable Line)	
(City) (State) (Zip)		Table I - Non-Derivative Securities Beneficially Owned						
1.Title of Security (Instr. 4)				•	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock 5			500		D			
Reminder: Report on a separate line for each class Persons who responses to the control of the			-	ed directly or indirectly.	this form are n	ot required to re	SEC 1473 (7-02)	
unless the form displays a currently valid OMB control number.								
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
(Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year) 3.			•	Price of Derivative	Form of Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	(D) or Indirect (I) (Instr. 5)		

Reporting Owners

Depositing Owner Name /	Relationships			
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
Wasserman Zachary Jacob HUNTINGTON CENTER 41 S. HIGH STREET COLUMBUS, OH 43287			CFO and Senior Exec. VP	

Signatures

Elizabeth B. Moore, Attorney-in-Fact	11/05/2019
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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).

Remarks:

zjwpoa102519.pdf Power of attorney of reporting person

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.