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 Ty	pe Response	s)																	
1. Name and Address of Reporting Person* CRANE ANN B					Н	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)					
(Last) (First) (Middle) HUNTINGTON CENTER, 41 S. HIGH STREET						3. Date of Earliest Transaction (Month/Day/Year) 04/27/2020													
(Street)						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						
COLUM (City	BUS, OH	(State)		(Zip)			т.	-1-1 - T	. N.	D	C								
1.Title of Security (Instr. 3)		2. Transaction 2A. Date Exect (Month/Day/Year) any		any	cution Date, if Conth/Day/Year)		3. Transaction Code		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5 B F T	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership		
							ode	V	Amount	(A) or (D)	Price					(I) (Instr. 4)			
Common Stock		04/27/202	2020				A		3,213.722	A	\$ 8.751	2	20,276.028 (1)			I	Director Deferred Compensation Plan		
Common	Stock												1	00,201			D		
Common Stock													7	74,784.454 (1)			Ī	By Issu Deferre Comper Plan for Hunting Bancsha Incorpo Directo	d nsation gton ares rated
Reminder:	Report on a s	separate	line for each				·			Persons w contained the form d	ho re in thi	is form ys a cı	n are urrei	not requently valid	ired to res	spond	lunless	SEC 147	74 (9-02)
		ı			(e.g.,	puts, ca	lls, wa	arran	ıts, oj	ptions, conve	rtible	securi	ties)			ı			
Security	Conversion		/Day/Year)	any	med on Date, if Day/Year	Code	etion B)		vative rities nired or osed 0)	and Expirat (Month/Day	and Expiration Date A Month/Day/Year) L S		Amo Und Secu	curities str. 3 and (Instr. 5) Be Ow Fol Rej		Deriv Secur Benef Owne Follov Repor	ative rities ficially ed wing rted action(s)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	Beneficial
						Code	V	(A)	(D)	Date Exercisable		iration e	Title	Amount or Number of Shares					

Reporting Owners

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

CRANE ANN B HUNTINGTON CENTER 41 S. HIGH STREET COLUMBUS, OH 43287	X				
---	---	--	--	--	--

Signatures

Elizabeth B. Moore	04/29/2020
**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) Total includes the exempt acquisition of shares via the automatic reinvestment of dividends through March 31, 2020.

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.