FORM 4	4
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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).

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

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### 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 Responses)										
1. Name and Address of Repor ELLIOTT STEVEN G				r or Trading S CSHARES	•	5. Relationship of Reporti (Check a XDirector Officer (give title below)	all applicable)			
(Last) (First HUNTINGTON CENTE STREET	· · · · ·	3. Date of E 04/27/202		nsact	ion (Month/D	ay/Ye	ear)			
(Stree COLUMBUS, OH 4328	4. If Amend	lment, Date	e Oriș	ginal Filed(Mor	nth/Day	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State	e) (Zip)		Table	[ - N	on-Derivative	e Seci	irities Acc	uired, Disposed of, or Bend	eficially Own	ed
1.Title of Security (Instr. 3)	Instr. 3) Date Exe (Month/Day/Year) any		ed 3. Date, if Transaction Code (Instr. 8)		or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect	Beneficial Ownership
			Code	V	Amount	(A) or (D)	Price	(1150. 5 and 4)	(I) (Instr. 4)	(1150.4)
Common Stock	04/27/2020		A		1,285.509	A	\$ 8.7514	11,123.157 <del>(1)</del>	I	Director Deferred Compensation Plan
Common Stock			1					100,064.288	D	
Common Stock								7,419.607 <u>(1)</u>	I	By Issuer's Deferred Compensation Plan for Huntington Bancshares Incorporated Directors

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information SEC 14 contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1474 (9-02)

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	ion	Num	ber	and Expirati	on Date	Amou	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	ative			Securities		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secur	rities			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security					Acqu	ired			4)			Following	Direct (D)	
						(A) o	r						Reported	or Indirect	
						Dispo	osed						Transaction(s)	(I)	
						of (D	)						(Instr. 4)	(Instr. 4)	
						(Instr	. 3,								
						4, and	15)								
											Amount				
								_			or				
									Expiration	Title	Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				

## **Reporting Owners**

		Relations	nips	
Reporting Owner Name / Address	Director	10% Owner	Officer	Other

ELLIOTT STEVEN G HUNTINGTON CENTER 41 S. HIGH STREET COLUMBUS, OH 43287	Х			
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### **Signatures**

Elizabeth B. Moore, Attorney-in-Fact	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.