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 * Kline Katherine M. A.					Ж	2. Issuer Name and Ticker or Trading Symbol HUNTINGTON BANCSHARES INC/MD [HBAN]							_X_ D	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director					
(Last) (First) (Middle) HUNTINGTON CENTER, 41 S. HIGH STREET						3. Date of Earliest Transaction (Month/Day/Year) 07/27/2020													
(Street) COLUMBUS, OH 43287					4. I	4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ Form	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person						
(City	')	(State)		(Zip)			Ta	able I	- No	n-Derivativ	e Sec	urities A	cquired, Di	sposed of, or I	Benefic	ially Ow	ned		
1.Title of Security (Instr. 3)			Date (Month/Day/Year) any		Execution	ecution Date, if		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Beneficia Following Transacti	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Form: Direct (D)	Indirect Beneficia	Beneficial Ownership	
								ode	V	Amount	(A) or (D)	Price		()		(I) (Instr. 4)			
Common Stock		07/27/2020					A		241.121	A	\$ 9.331	4 1,618.8	1,618.848 ⁽¹⁾		I	Director Deferred Compensation Plan			
Common Stock												24,553.	24,553.193 (2)		D				
Reminder:	Report on a s	separate	line for each	n class of	securities	beneficia	lly ov	wned o	direct	ly or indire	ctly.								
										contained	l in th	nis form	n are not re	lection of inf equired to res lid OMB cont	spond	unless	SEC 14	74 (9-02)	
				Table						ed, Dispose tions, conv			ficially Own	ed					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans Date (Month	saction /Day/Year)	any	med on Date, if Day/Year	Code	tion)	5. Numbor of Deriv. Secur Acqui (A) on Dispo of (D) (Instr. 4, and	ative ities ired seed) . 3,	and Expiration Date (Month/Day/Year) Date Exercisable Expiration Date Exercisable T		7. Title and Amount of Underlying Securities (Instr. 3 and 4) Amount of Numb of Share	int eer	Deriva Securi Benefi Owned Follow Report	ities icially d ving ted action(s)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	Beneficial		

Reporting Owners

P 4' 0 N /	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Kline Katherine M. A. HUNTINGTON CENTER 41 S. HIGH STREET COLUMBUS, OH 43287	X						

Signatures

Elizabeth B. Moore	07/29/2020			
**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 July 27, 2020.
- (2) Total reflects impact of the exempt automatic reinvestment of dividends on awards of deferred stock units, through July 27, 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.