## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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).

**Reporting Owners** 

#### 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 Resp	ponses)																
1. Name and Address of Reporting Person* Kleinman Scott D				HUNTIN	2. Issuer Name and Ticker or Trading Symbol HUNTINGTON BANCSHARES INC /MD/ [HBAN]						, <u> </u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X Officer (give title below) Other (specify below)  Sr. EVP of Principal Sub.					
(Last) (First) (Middle) HUNTINGTON CENTER, 41 S. HIGH STREET					3. Date of Earliest Transaction (Month/Day/Year) 05/01/2021								Sr. EV	P 01 I	rincipai S	oub.	
(Street) COLUMBUS, OH 43287			4. If Amen	4. If Amendment, Date Original Filed(Month/Day/Year)						_X_	6. Individual or Joint/Group Filing(Check Applicable Line)  Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)		(State)	(Zip)		ŗ	Table I -	Non-	Derivativ	e Secu	rities A	cquirec	d, Dispo	osed of, or Be	enefic	cially Ow	ned	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	any	ecution Date, if Transaction					5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. Ownersh Form: Direct (Dor Indirect (I)	/	al nip		
						Code	V	Amount	or (D)	Price					(Instr. 4)		
Common Stock	k		05/01/2021			A		10,527 (1)	A	\$ 0	169,9	993 (2)	l		D		
Common Stock			05/01/2021			F		1,393 (3)	D	\$ 0	168,6	168,600			D		
Common Stock	k		05/01/2021			F		1,850 (3)	D	\$ 15.32	166,7	750			D		
Common Stock	k		05/01/2021			F		4,572 (4)	D	\$ 15.32	162,1	178			D		
Common Stock											288.1	288.13			I	By Issu Supple Stock Purcha Tax Sa Plan	mental se and
Reminder: Report	on a se	parate line	e for each class of se	curities benefic	ially	owned di	rectly	or indirec	tly.								
							С	ontained	in th	is form	n are no	ot requ	ction of info ired to resp OMB contr	pond	l unless	SEC 147	74 (9-02)
			Table I	I - Derivative S (e.g., puts, c								Owned					
1. Title of Derivative Security (Instr. 3)  Price of Derivative Security (Instr. 3)	ersion lercise of ative		Execution any	ed 4.	actio	5. Number of Derivat Securit Acquire (A) or Dispose of (D) (Instr. 3 4, and 5	r a (ive ies ed ed s,	6. Date Exe and Expira	exercisable 7. T ration Date Am Day/Year) Und Section		7. Title Amoun Underly Securiti (Instr. 3	t of ying ies	Owno Follo Repo		ative rities ficially ed wing rted action(s)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Naturof Indirect Beneficia Ownershi (Instr. 4)
				Code	e V	7 (A) (		Date Exercisable		iration e	Title N	Number					

Relationships

Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Kleinman Scott D HUNTINGTON CENTER 41 S. HIGH STREET COLUMBUS, OH 43287			Sr. EVP of Principal Sub.		

### **Signatures**

Elizabeth B. Moore, Attorney-in-Fact	05/04/2021		
**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) Shares earned for 2018-2020 performance share unit (PSU) award cycle.
- (2) Total includes accrued dividend equivalents reflecting exempt automatic reinvestment of dividends on awards of restricted stock units.
- (3) Shares were withheld to cover the associated tax liability upon the vesting of a previously granted award of RSUs.
- (4) Shares were withheld to cover the associated tax liability upon the vesting of shares for the 2018 2020 PSU cycle.

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.