## 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).

#### 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)													
Name and Address of Reporting Person *  Jones Michael Scott				2. Issuer Name and Ticker or Trading Symbol HUNTINGTON BANCSHARES INC /MD/ [HBAN]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X Officer (give title below) Other (specify below)  SEVP of Significant Subsidiary					
(Last) (First) (Middle) HUNTINGTON CENTER, 41 S. HIGH STREET				3. Date of Earliest Transaction (Month/Day/Year) 01/04/2022						SEVP of	Significal	nt Subs	diary		
(Street)				4. If Amendmen	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					
(City	BUS, OH	(State)	(Zip)		Table I -	Non-D	erivative	Securiti	es Aca						
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, i	3. Transacti Code (Instr. 8)		ion 4. Securities Acquired		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. Owne: Form: Direct	7. N Ind Ber	7. Nature of Indirect Beneficial Ownership		
				Code	· V	Amount	(A) or (D)	Price				or Ind (I) (Instr.	,	str. 4)	
Common Stock		01/04/2022		F(1)		2,961	D	\$ 15.8	220,285.295			D			
Common Stock		01/04/2022		F(2)		8,032	D	\$ 15.8	212,253.295		D				
Common Stock									102,647 (3)		I		by Revocable Trust		
Common Stock									43,356.2461 <sup>(4)</sup>		I	40	by TCF 401(k) Plan (3)		
Common Stock									39,280.9	021 (3)		I		TCF RP (5)	
Reminder:	Report on a s	separate line f	for each class of secu	urities beneficially	owned di	·									
						СО	ntained i	n this f	orm a	re not requ	ction of inf uired to res OMB con	spond un	iless	SEC 14	74 (9-02)
			Table II -	Derivative Secur											
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day)	Execution D y/Year) any		5.	6. ar (N ive less ed led led led led led led led led led	(Month/Day/Year) U So (I		7. An Un Sec	Title and nount of derlying curities str. 3 and Security (Instr. 5)  Security (Instr. 5)  Ref. Title and nount of Derivative Dr. Security (Instr. 5)  Bell Ref. Title and nount of Derivative Dr. Security (Instr. 5)  Bell Ref. Title and nount of Derivative Dr. Security (Instr. 5)  Bell Ref. Title and nount of Derivative Dr. Security (Instr. 5)		Derivativ Securities Beneficia Owned Following Reported	ative own ities Form Form Derically Secution of Iraction (s)		(Instr. 4)
				Code V	(A)	E	ate xercisable	Expirat Date	ion Tit	Amount or Number of Shares					

## **Reporting Owners**

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

### **Signatures**

Kirk D. Johnson, Attorney-in-Fact	01/05/2022
**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 were withheld to cover the associated tax liability upon the vesting of a previously granted award of RSAs.
- (2) Shares were withheld to cover the associated tax liability upon the vesting of a previously granted award of RSUs.
- (3) The filing of this statement shall not be construed as an admission that the undersigned is, for the purpose of Section 16 of the Securities and Exchange Act of 1934 or otherwise, the beneficial owner of the securities.
- Total reflects the exempt acquisition via the automatic reinvestment of dividends and the reduction of shares related to the return of match on excess contributions to the TCF 401K Plan
- (5) The shares noted are derivative securities based on the Reporting Person's benefits under a non-qualified plan.

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.