FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
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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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  Heller Paul G					HU	2. Issuer Name and Ticker or Trading Symbol HUNTINGTON BANCSHARES INC /MD/ [ HBAN ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director 10% Owner  Officer (circ title Check (case))					
(Last) HUNTINGTO		,	(Middle)				3. Date of Earliest Transaction (Month/Day/Year) 11/04/2022  4. (Assurable and Date of Original Filed (Month/Day/Year)									X Officer (give title below) Other (specify below) Sr. EVP & Chief Technology Off				
(Street) COLUMBUS (City)	OH (State)		287		4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X    Form filed by One Reporting Person     Form filed by More than One Reporting Person					
(5.13)	(Glaio)		Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/N				tion	2A. Deemed Execution Date,		3. Tran Code	sactio e (Insti	1 n (	4. Securities Acquired (A				5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	e V	4	Amount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)			"	nstr. 4)	
Common Stock 11/04/20				022	22		S			20,195	D	\$15.	.2106(1)	448,423.789(2)		D				
Common Stock														6,970.76	(3)	Ι	S S F T	By Issuer's supplemental stock furchase and Fax Savings stlan <sup>(4)</sup>		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
Security (Instr. 3) or Exercise (Month/Day/Year) if any				tion Date, Trans		saction Der (Instr. Sec Acc or E			Expiration Da (Month/Day/Y		Date Secur y/Year) Deriva		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	derivat Securi Benefi Owned Follow Report	ties cially d	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	isabl	Expiration le Date	Title		Amount or Number of Shares	s	(Instr. 4)				

## Explanation of Responses:

- 1. This transaction was executed in multiple trades ranging from \$15.21 to \$15.215. The price reported above reflects the weighted average sale price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer, full information regarding the number of shares and prices at which the transaction was effected.
- 2. Total includes accrued dividend equivalents reflecting exempt automatic reinvestment of dividends on awards of restricted stock units.
- 3. Total includes the exempt acquisition of shares via the automatic reinvestment of dividends.
- 4. 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.

Kirk D. Johnson, Attorney-in-Fact 11/08/2022

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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