FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

APPROVAI	

OMB Number:	3235-0287
Estimated average burd	den
houre per reenonee:	0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule

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

10b5-1(c). See Instru	uction 10.					
Name and Address of Reporting Person* Houston Helga			2. Issuer Name and Ticker or Trading Symbol HUNTINGTON BANCSHARES INC /MD/ [HBAN]	(Check	tionship of Reporting Person(s) all applicable) Director Officer (give title	to Issuer 10% Owner Other (specify
(Last) (First) (Middle) HUNTINGTON CENTER 41 S. HIGH STREET		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 07/01/2024	X	Senior Exec. V.	below) P.
			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person		
(Street)					Form filed by More than One	Reporting Person
COLUMBUS	ОН	43287			,	. 0
(City)	(State)	(Zip)				

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction D Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr.
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		4)
Common Stock	07/01/2024		A		2,336.379	A	\$0.0000	567,479.874(1)	D	
Common Stock	07/01/2024		A		3,768.414	A	\$0.0000	324,905.36(1)	I	By Executive Deferred Compensation Plan ⁽²⁾
Common Stock	07/01/2024		A		416.899	A	\$0.0000	18,461	I	By Issuer's Supplemental Stock Purchase and Tax Savings Plan ⁽²⁾

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	 3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transac Code (Ir 8)	str.	Derivat Securit Acquire or Disp	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	Ownership Form: Direct (D)	Beneficial Ownership (Instr. 4)	
			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)	;)	

Explanation of Responses:

- 1. Reflects the transfer of 32,673.79 shares of common stock to the reporting person from the Issuer's Direct Holdings to the Executive Deferred Compensation Plan.
- 2. 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.

07/03/2024 Anne Kruger, Attorney-in-Fact ** Signature of Reporting Person Date

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

- * 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.