FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
	OMB Number:	3235-0287							
1	Estimated average b	urden							

0.5

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*  KELLETT SHERRY A				2. Issuer Name and Ticker or Trading Symbol MEDICAL PROPERTIES TRUST INC [							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
				MPW ]								X Dire	ctor	10% (	Owner		
(Last) (First) (Middle) 1000 URBAN CENTER DRIVE SUITE 501				INIT AA ]								Offic belo	er (give title w)		Other (specify below)		
				3. Date of Earliest Transaction (Month/Day/Year) 02/14/2008										,			
				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) BIRMINGHAM AL 35242												- 1	X Forn	•	e Reporting Pers		
													Form filed by More than One Reporting Person				
(City)	(St	tate) (	Zip)														
		Tabl	le I - Nor	-Deriva	ative S	ecuritie	es Acc	uired,	Dis	posed o	f, or	Bene	ficial	ly Own	ed		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)						Secur Benef	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code V		Amount	(A) or (D)		Price		Transaction(s) (Instr. 3 and 4)		(111501.4)
Common	Stock, par	value \$.001		02/14	/2008			A		6,000(	1)	A	\$ <mark>0</mark>	1	5,810	D	
		Та	able II - D							sed of, onvertib				Owned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	ion Date Execut ise (Month/Day/Year) Execut if any (Month	3A. Deeme Execution if any (Month/Da	n Date, Tra	Transactio Code (Inst			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Titl Amou Secur Unde Deriv Secur and 4	int of rities rlying ative rity (Ins )	str. 3	. Price of Derivative Decurity Destr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
												Amo	unt		1		1

## **Explanation of Responses:**

1. Represents an award of restricted common stock, under the Second Amended and Restated Medical Properties Trust, Inc. 2004 Equity Incentive Plan, which vests in three equal annual amounts beginning February 14, 2009, and with respect to which the recipient has the right to participate fully in dividends and distributions paid by the Issuer.

(D)

Date Exercisable Expiration

Date

Philip Summerlin, by power of attorney

\*\* Signature of Reporting Person

Number

of Shares

Title

02/28/2008

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).

Code

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.