FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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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(h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

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 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1(c). See Instruction 10.																			
Name and Address of Reporting Person* Hanna James Kevin						2. Issuer Name and Ticker or Trading Symbol MEDICAL PROPERTIES TRUST INC [5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
					MPW]								Of	icer (give title ow)		Other (s			
(Last) (First) (Middle) 1000 URBAN CENTER DRIVE SUITE 501					3. Date of Earliest Transaction (Month/Day/Year) 10/02/2024									Senior VP, Controller & CAO					
(Street) BIRMINGHAM AL 35242				4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person						
DIRWINGHAM AL 33242															Form filed by More than One Reporting Person				
(City)	(Sta	ate) (Z	Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date)				Execution		Date, Transact Code (In							nd Sec Ben Owr	mount of urities eficially ed Following orted	Forn (D) o	6. Ownership Form: Direct D) or Indirect I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A (D	() or ()	Price	Tran	saction(s) r. 3 and 4)			(msu. 4)	
Common stock, par value \$0.001 10/02/2					2024		F		1,682(1)		D	\$5 .	9	378,554		D			
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	3. Transaction Date (Month/Day/Year)	if any	med on Date, Day/Year)	4. Transaction Code (Instr. 8) 5. Num of Derivat Securit Acquir (A) or Dispos of (D) (Instr. 2 and 5)			rative rities ired r osed)	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		nstr.	8. Price of Derivativ Security (Instr. 5)		ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Nur of	ount nber ıres					

Explanation of Responses:

1. Represents shares withheld upon vesting of restricted stock to satisfy tax withholding obligations. This does not constitute a sale transaction.

W. Zachary Riddle, by power of attorney

10/03/2024

** Signature of Reporting Person 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.