## FORM 5

Check this box if no longer subject to

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

**OWNERSHIP** 

Machinaton	$D \subset$	205/10
Washington,	D.C.	20549

wasnington,	D.C. 20549	

OMB APPRO	DVAL						
OMB Number:	3235-0362						
Estimated average burden							
hours per response:	1.0						

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

☐ Form 3	3 Holaings Rep	ortea.																
Form 4	4 Transactions	Reported.	Fil	ed pursuant t or Sectio					ırities Excha Company Ad		of 1934							
Name and Address of Reporting Person*     ORR L GLENN JR				MEDI	2. Issuer Name and Ticker or Trading Symbol MEDICAL PROPERTIES TRUST INC							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner						
				_ MPW ]									er (give title	2		r (specify		
(Last) (First) (Middle)													(give uud /)	5	belo			
1000 URBAN CENTER DRIVE SUITE 501					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2007													
				4. If Amer	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable					
(Street) BIRMINGHAM AL 35242				_								Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting  Person						
(City)	(S	tate) (	(Zip)									1.5.55						
		T-1-1	la I. Nava Basis			^					6: . :	- 11 0	.1					
		Tab	le I - Non-Deri	vative Sec	uriti	es A	cquired	d, D	isposed	of, or E	Benefici	ally Owne	d					
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)			Execution D	2A. Deemed Execution Date, if any (Month/Day/Year)			4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)			r Disposed	Securitie Beneficia	s ally	6. Owner Form (D) or	ership Ind : Direct Bei	7. Nature of ndirect Beneficial Ownership			
				(Monthin Day)	(Month/Day/Year)			Amoı	ınt	(A) or (D)	Price	Issuer's	Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)			(Instr. 4)		
		Ta	able II - Deriva	tive Secu	rities	Acc	quired,	Dis	posed of	, or Be	neficial	ly Owned						
				uts, calls														
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	of	rative rities iired r osed )	6. Date Exercisable and Expiration Date (Month/Day/Year)  7. Title and Amount of Securities Underlying Derivative (Instr. 3 and		of es ng re Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)				
					(A)	(D)	Date Exercisal	ble	Expiration Date	Title	Amount or Number of Shares							
Deferred Stock Units <sup>(1)</sup>	\$14.95	03/29/2007		J <sup>(2)</sup>	188		05/18/20	09	(3)	Common Stock, par value \$.001	188	\$14.95	11,29	00	D			
Deferred Stock Units <sup>(1)</sup>	\$13.51	06/14/2007		J <sup>(2)</sup>	212		05/18/20	09	(3)	Common Stock, par value \$.001	212	\$13.51	11,29	00	D			
Deferred Stock Units <sup>(1)</sup>	\$13.58	09/14/2007		J <sup>(2)</sup>	215		05/18/20	009	(3)	Common Stock, par value \$.001	215	\$13.58	11,29	00	D			
Deferred Stock Units <sup>(1)</sup>	\$11.22	12/14/2007		J <sup>(2)</sup>	265		05/18/20	009	(3)	Common Stock, par value \$.001	265	\$11.22	11,29	00	D			

## **Explanation of Responses:**

- 1. Represents the rights to receive common stock by May, 2009.
- 2. The transaction represents additional deferred stock units in lieu of cash dividends on vested deferred stock units as required by the Second Amended and Restated 2004 Equity Incentive Plan.
- 3. The deferred stock units will not expire.

Philip Summerlin, by power of attorney

02/14/2008

\*\* 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.