FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 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* ORR L GLENN JR						2. Issuer Name and Ticker or Trading Symbol MEDICAL PROPERTIES TRUST INC [mpw]										all app	olicable) ctor	ng Person	Person(s) to Issuer 10% Owner		
(Last) (First) (Middle) 1000 URBAN CENTER DRIVE SUITE 501						3. Date of Earliest Transaction (Month/Day/Year) 02/28/2007										belov	er (give title w)		Other below)	(specify	
(Street) BIRMINGHAM AL 35242 (City) (State) (Zip)					_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Indiv ne) X	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						ır) E	A. Deemed xecution Date, any //onth/Day/Year)		Code (Transaction Dispose Code (Instr. 5)			ties Acquired (A) d Of (D) (Instr. 3, 4			Securi Benefi	cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										v	Amount	(A (I	A) or D)	Price		Transaction(s) (Instr. 3 and 4)				,	
common stock, par value \$.001 02/28/						2007			A		500		A \$1		.11	18,300		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)	erivative Conversion Date Execution Date curity or Exercise (Month/Day/Year) if any				Date, Transaction Code (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)					9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own Forn Direc or In (I) (Ir	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	of	mber ares							

Explanation of Responses:

Philip Summerlin/by power of <u>attorney</u>

03/02/2007

** 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.