

FORM 5

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).
- ☐ Form 3 Holdings Reported.
- ☐ Form 4 Transactions Reported.

ANNUAL 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

OMB APPROVAL

OMB Number: 3235-0362

Estimated average burden hours per response: 1.0

1. Name and Address of Reporting Person* <u>Pitman Elizabeth N</u> (Last) (First) (Middle) <u>1901 SIXTH AVE NORTH</u> <u>SUITE 1400</u> (Street) <u>BIRMINGHAM AL</u> <u>35203</u> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>MEDICAL PROPERTIES TRUST INC [</u> <u>MPW]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner Officer (give title below) Other (specify below)
	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) <u>12/31/2022</u>	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> 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. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Amount	(A) or (D)	Price			
Common stock, par value \$0.001	01/09/2020		L5	38 ⁽¹⁾	A	\$21.01	36,740	D	
Common stock, par value \$0.001	04/09/2020		L5	44 ⁽¹⁾	A	\$18.74	36,784	D	
Common stock, par value \$0.001	07/16/2020		L5	46 ⁽¹⁾	A	\$18.23	36,830	D	
Common stock, par value \$0.001	10/08/2020		L5	46 ⁽¹⁾	A	\$18.4	36,876	D	
Common stock, par value \$0.001	01/07/2021		L5	43 ⁽¹⁾	A	\$20.1	36,919	D	
Common stock, par value \$0.001	04/08/2021		L5	41 ⁽¹⁾	A	\$21.94	36,960	D	
Common stock, par value \$0.001	07/08/2021		L5	46 ⁽¹⁾	A	\$20.14	37,006	D	
Common stock, par value \$0.001	10/14/2021		L5	46 ⁽¹⁾	A	\$20.53	37,052	D	
Common stock, par value \$0.001	01/13/2022		L	40 ⁽¹⁾	A	\$23.72	37,092	D	
Common stock, par value \$0.001	01/14/2022		L	217 ⁽¹⁾	A	\$23.83	37,309	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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
						Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
					(A) (D)							

Explanation of Responses:

1. Pertains to de minimis dividend reinvestment transactions.

W. Zachary Riddle, by power of attorney 02/13/2023

** 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.