FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washin

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

gton, D.C. 20549	OMB APPROVAL

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

## Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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*  Holmes Robert E  (Last) (First) (Middle)  1000 URBAN CENTER DRIVE  SUITE 501  (Street)  BIRMINGHAM AL 35242  (City) (State) (Zip)							2. Issuer Name and Ticker or Trading Symbol MEDICAL PROPERTIES TRUST INC MPW  3. Date of Earliest Transaction (Month/Day/Year) 05/18/2006  4. If Amendment, Date of Original Filed (Month/Day/Year) 05/22/2006									Relationship of Reporting Perseck all applicable)  X Director Officer (give title below)  Individual or Joint/Group Filinge)  X Form filed by One Reporting Berson			10% Owner Other (specify below)  g (Check Applicable orting Person	
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)  Table II - Derivati						2A. Deemed Execution Date, if any (Month/Day/Yea			3. Transac Code (I 8) Code	ction nstr. V	(A) or		red (A) estr. 3, 4	or and	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	Date,	4. Transacti Code (Ins 8)				6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		ity	Price of Derivative Decurity Security	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)	
Deferred stock units <sup>(1)</sup>	\$10.69	05/18/2006			Code A	v	(A) 5,000	(D)	Date Exercisable	e D	xpiration ate	Title  Common stock, par value \$.001	Amou or Numl of Share	oer es	(3)	7,355		D		

## **Explanation of Responses:**

- 1. Represents the right to receive 5,000 shares of common stock at no cost in May, 2009.
- 2. The deferred stock units will not expire.
- 3. The deferred stock units were awarded at no costs.

## Remarks:

The original filing reported an incorrect exercisable date (Table II, column 6) of 05/18/2006. The correct exercisable date is 05/18/2009.

Phil Summerlin, by power of attorney \*\* Signature of Reporting Person

05/22/2006 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.