FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
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	Check this box if no longer subject to
٦.	Section 16. Form 4 or Form 5 obligations may continue. See
J	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* McLean Emmett E					ME	2. Issuer Name and Ticker or Trading Symbol MEDICAL PROPERTIES TRUST INC MPW]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
						3. Date of Earliest Transaction (Month/Day/Year) 09/28/2015										X Office (give title Office (specify below) below) EVP, Secretary and COO				
(Street) BIRMIN (City)	GHAM AI		35242 Zip)		4. If .	4. If Amendment, Date of Original Filed (Month/Day/Year)									. Indivine) X	ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tabl	e I - No	n-Deriv	ative	Sec	uritie	s Ac	quired,	Dis	posed o	f, or	Ben	efici	ally	Owne	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Date,			Transaction Disposed Code (Instr.			ities Acquired (A) o d Of (D) (Instr. 3, 4			and 5) Secu Bene Owne		cially I Following	6. Ownersh Form: Direc (D) or Indire (I) (Instr. 4)	of Indirect Ct Beneficial Ownershi	of Indirect Beneficial Ownership	
								Code	v	Amount	(<i>A</i>	A) or D)	Price		Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	(11150.4)	
Common Stock, par value \$.001 09/28/2						2015		S		7,200		D	\$11.14		966,628		D			
Common Stock, par value \$.001 09/28/2						2015		S		31,576	D \$13		\$11	.13 935,052		35,052	D			
Common Stock, par value \$.001 09/28/2					/2015	2015		S		800	D \$11.		135	934,252		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. Deen Executio if any (Month/D	n Date,	Code (In:				6. Date E Expiration (Month/E	n Dat		7. Title and Amount of Securities Underlying Derivative Security (Ins and 4)			Deri Secu	rice of ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirec Beneficial Ownershi ct (Instr. 4)	Beneficial Ownership
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nu of	nount mber ares						

Explanation of Responses:

Alison G. Schmidt, by power of attorney

09/30/2015

** 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.