FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	Check this box if no longer subject to									
١	Section 16. Form 4 or Form 5									
ı	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* <u>Stewart Michael G</u>						MI	2. Issuer Name <b>and</b> Ticker or Trading Symbol  MEDICAL PROPERTIES TRUST INC  MPW ]									eck all a	oplicable) ector	g Person(s) to I	Owner	
(Last) (First) (Middle) 1000 URBAN CENTER DRIVE SUITE 501						12/	3. Date of Earliest Transaction (Month/Day/Year) 12/04/2018									bel	icer (give title ow)	below		
(Street) BIRMINGHAM AL 35242						4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									e) <mark>X</mark> Fo	ridual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person  Form filed by More than One Reporting  Person			
(City) (State) (Zip)  Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da							Execution Date,			Code	Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)					Secu Bend Own	mount of urities eficially ed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
											v	Amount	()	A) or D)	Price	Tran	orted saction(s) r. 3 and 4)		(Instr. 4)	
Common stock, par value \$0.001 12/04/							2018		S		5,800		D	\$17.39		225,239	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	ion ise /e	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr. 8)				6. Date Expirat (Month	ion Da		7. Title and Amount of Securities Underlying Derivative Security (Instr and 4)		str. 3	. Price of Perivative Security Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amo or Nun of Sha	nber					

**Explanation of Responses:** 

Emily R. Sawyer, by power of attorney

12/06/2018

\*\* 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.