

Form 144

FORM 144

NOTICE OF PROPOSED SALE OF SECURITIES  
PURSUANT TO RULE 144 UNDER THE SECURITIES ACT OF 1933

## 144: Filer Information

Filer CIK 0001331453  
Filer CCC XXXXXXXXX  
Is this a LIVE or TEST Filing?  LIVE  TEST

### Submission Contact Information

Name  
Phone  
E-Mail Address

## 144: Issuer Information

Name of Issuer MEDICAL PROPERTIES TRUST INC  
SEC File Number 001-32559  
Address of Issuer 1000 URBAN CENTER DRIVE  
SUITE 501  
BIRMINGHAM  
ALABAMA  
35242  
Phone 205-969-3755  
Name of Person for Whose Account the Securities are To Be Sold Stewart Michael G

See the definition of "person" in paragraph (a) of Rule 144. Information is to be given not only as to the person for whose account the securities are to be sold but also as to all other persons included in that definition. In addition, information shall be given as to sales by all persons whose sales are required by paragraph (e) of Rule 144 to be aggregated with sales for the account of the person filing this notice.

Relationship to Issuer Director

## 144: Securities Information

Title of the Class of Securities To Be Sold	Name and Address of the Broker	Number of Shares or Other Units To Be Sold	Aggregate Market Value	Number of Shares or Other Units Outstanding	Approximate Date of Sale	Name the Securities Exchange
Common	Charles Schwab Corp. 3000 Schwab Way Westlake TX 76262	32780	179962.20	600200000	10/09/2024	NYSE

Furnish the following information with respect to the acquisition of the securities to be sold and with respect to the payment of all or any part of the purchase price or other consideration therefor:

## 144: Securities To Be Sold

Title of the Class	Date you Acquired	Nature of Acquisition Transaction	Name of Person from	Is this	Date Donor Acquired	Amount of Securities Acquired	Date of Payment	Nature of Payment *
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		Whom Acquired	a Gift?			
Common	10/01/2016	Compensation	Issuer	<input type="checkbox"/>	309	10/01/2016 N/A
Common	01/01/2017	Compensation	Issuer	<input type="checkbox"/>	309	01/01/2017 N/A
Common	04/01/2017	Compensation	Issuer	<input type="checkbox"/>	915	04/01/2017 N/A
Common	07/01/2017	Compensation	Issuer	<input type="checkbox"/>	915	07/01/2017 N/A
Common	10/01/2017	Copensation	Isssuer	<input type="checkbox"/>	915	10/01/2017 N/A
Common	01/01/2018	Compensation	Issuer	<input type="checkbox"/>	915	01/01/2018 N/A
Common	04/01/2018	Compensation	Issuer	<input type="checkbox"/>	915	04/01/2018 N/A
Common	07/01/2018	Compensation	Issuer	<input type="checkbox"/>	2289	07/01/2018 N/A
Common	10/01/2018	Copensation	Issuer	<input type="checkbox"/>	1602	10/01/2018 N/A
Common	01/01/2019	Compensation	Issuer	<input type="checkbox"/>	1598	01/01/2019 N/A
Common	04/01/2019	Compensation	Issuer	<input type="checkbox"/>	1811	04/01/2019 N/A
Common	07/01/2019	Compensation	Issuer	<input type="checkbox"/>	1811	07/01/2019 N/A
Common	10/01/2019	Copensation	Issuer	<input type="checkbox"/>	1811	10/01/2019 N/A
Common	01/01/2020	Compensation	Issuer	<input type="checkbox"/>	1802	01/01/2020 N/A
Common	04/01/2020	Compensation	Issuer	<input type="checkbox"/>	1642	04/01/2020 N/A
Common	07/01/2020	Compensation	Issuer	<input type="checkbox"/>	1642	07/01/2020 N/A
Common	10/01/2020	Compensation	Issuer	<input type="checkbox"/>	1642	10/01/2020 N/A
Common	01/01/2021	Compensation	Issuer	<input type="checkbox"/>	1640	01/01/2021 N/A
Common	04/01/2021	Compensation	Issuer	<input type="checkbox"/>	1449	04/01/2021 N/A
Common	07/01/2021	Compensation	Issuer	<input type="checkbox"/>	1449	07/01/2021 N/A
Common	10/01/2021	Compensation	Issuer	<input type="checkbox"/>	1449	10/01/2021 N/A
Common	01/01/2022	Compensation	Issuer	<input type="checkbox"/>	1439	01/01/2022 N/A
Common	04/01/2022	Compensation	Issuer	<input type="checkbox"/>	1394	04/01/2022 N/A
Common	07/01/2022	Compensation	Issuer	<input type="checkbox"/>	1117	07/01/2022 N/A

\* If the securities were purchased and full payment therefor was not made in cash at the time of purchase, explain in the table or in a note thereto the nature of the consideration given. If the consideration consisted of any note or other obligation, or if payment was made in installments describe the arrangement and state when the note or other obligation was discharged in full or the last installment paid.

Furnish the following information as to all securities of the issuer sold during the past 3 months by the person for whose account the securities are to be sold.

## 144: Securities Sold During The Past 3 Months

Nothing to Report

## 144: Remarks and Signature

Remarks

Date of Notice 10/09/2024

**ATTENTION:**

The person for whose account the securities to which this notice relates are to be sold hereby represents by signing this notice that he does not know any material adverse information in regard to the current and prospective operations of the Issuer of the securities to be sold which has not been publicly disclosed. If such person has adopted a written trading plan or given trading instructions to satisfy Rule 10b5-1 under the Exchange Act, by signing the form and indicating the date that the plan was adopted or the instruction given, that person makes such representation as of the plan adoption or instruction date.

Signature MICHAEL STEWART

**ATTENTION: Intentional misstatements or omission of facts constitute Federal Criminal Violations (See 18 U.S.C. 1001)**