FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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*  THOMPSON C REYNOLDS III  (Last) (First) (Middle)  1000 URBAN CENTER DRIVE  SUITE 501				MI MF	MEDICAL PROPERTIES TRUST INC [MPW]  3. Date of Earliest Transaction (Month/Day/Year) 05/29/2018										celationship of Reporting the All applicable)  X Director  Officer (give title below)		ig Per	10% Owner Other (specify below)		
(Street) BIRMINGHAM AL 35242 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									i. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tabl	e I - Nor	n-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, oı	Bene	eficia	ally (	Owne	ed			
Date					Exec hth/Day/Year) if any			a. Deemed recution Date, any onth/Day/Year)				ities Acquired (A) d Of (D) (Instr. 3, 4			l and Securi Benefi Owned Repor		ities For		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	V	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				
Common stock, par value \$0.001 05/29/						3					8,242	(1)	A	\$0		18,591			D	
		Та	ble II - C								sed of, onvertib				y Ov	vned				
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)		of Derive Securial Acquial (A) or Disposof (D) (Instruand 5	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		n Date		Amount of Securities Underlying Derivative Security (In and 4)  Amount of Management of Security (In and 5)		ount nber	8. Pri Deriv Secu (Instr	ative rity	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	F C O	.0. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

## **Explanation of Responses:**

1. Shares vest at the beginning of each calendar quarter ending March 31, 2021; dividends are paid currently.

W. Zachary Riddle, by power of attorney

05/31/2018

\*\* 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.