FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB APPRO	VAL

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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* KELLETT SHERRY A (Last) (First) (Middle)					MI MP	Issuer Name and Ticker or Trading Symbol MEDICAL PROPERTIES TRUST INC [MPW] 3. Date of Earliest Transaction (Month/Day/Year)									theck all ap	ctor er (give title	g Perso	10% O	wner (specify
1000 UR	BAN CENT	ΓER DRIVE				17/2													
(Street) BIRMINGHAM AL 35242				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ne) X Forr Forr	Form filed by More than One Reporting				
(City)	(St	ate) (Zip)												Pers	5011			
		Tabl	e I - Non	-Deriv	ative	Sec	curitie	s Ac	quired,	Dis	posed o	f, or	Bene	ficia	lly Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution ay/Year) if any		a. Deemed ecution Date, any onth/Day/Year)		3. Transaction Code (Instr. 8) 4. Securitie Disposed (5)					nd Secur Benef	icially d Following	6. Own Form: I (D) or II (I) (Inst	Direct ndirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	Amount (A) or (D)		Price	Trans	action(s) 3 and 4)			(msu. 4)	
Common Stock, par value \$.001			03/17	<mark>7/201</mark> 5	2015			A		6,855(1)		A	\$(74,029		Ι)		
	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)			Date,	4. Transaction Code (Instr. 8)		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		unt	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own For Dire or I (I) (Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Num of Shar	.					

Explanation of Responses:

 $1. Shares \ vest \ ratably \ at \ the \ beginning \ of \ each \ of \ the \ 12 \ calendar \ quarters \ beginning \ April \ 1, 2015 \ and \ ending \ January \ 1, 2018.$

Alison G. Schmidt, by power of attorney

03/18/2015

** 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.