FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C. 20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
	OMB Number: 3235-0287								
	Estimated average burden								
ı	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).

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*				2. Issuer Name and Ticker or Trading Symbol MEDICAL PROPERTIES TRUST INC [5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
HAMNER R STEVEN				MPW]								X	Direc	tor		10% O	wner			
(Last)	(Fir	st) (1	Middle)			. 1								X	Office below	er (give title		Other (s	specify	
1000 URBAN CENTER DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 02/24/2021									Executive Vice President & CFO							
SUITE 501				02/24/2021																
					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable							
(Street)			ED 40											1 ′	Line) X Form filed by One Reporting Person					
BIRMIN	GHAM AI	. 3	5242											"	_	filed by Mo		Ü		
(City)	(Sta	ate) (2	Zip)												Perso	n				
(-19)																				
		Table	I - No	n-Deriva	tive	Secui	rities	Acq	uired,	Dis	posed of				y Own	ed				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day.					Execution Date,			3.			4 and Securi Benefi Owned		ties cially Following	6. Own Form: (D) or I (I) (Inst	Direct Indirect tr. 4)	7. Nature of Indirect Beneficial Ownership				
										v	Amount	(A) or (D)		rice	Report Transa (Instr. 3	ea ction(s) 3 and 4)			(Instr. 4)	
Common stock, par value \$0.001 02/24/20					2021			S		250,000	D \$2		S22.49	49 1,792,688		I	D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
				(e.g., pu	its, ca	alls, v	varra	ants,	optio	ns, c	onvertib	le se	curit	ies)						
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		of Deriv	r osed) r. 3, 4	Expiration Da		ate	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		str.	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: y Direct (D) or Indirec (I) (Instr.		11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amor or Num of Share	ber						

Explanation of Responses:

Emily R. Sawyer, by power of

02/25/2021

<u>attorney</u>

** 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.