FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average hurden										

0.5

hours per response:

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*  Aldag Edward K JR					<u>M</u>	2. Issuer Name <b>and</b> Ticker or Trading Symbol  MEDICAL PROPERTIES TRUST INC [ MPW ]								5. (C	heck a	onship on all application	cable)	g Person(s) to	lssuer Owner	
(Last) (First) (Middle) 1000 URBAN CENTER DRIVE SUITE 501						3. Date of Earliest Transaction (Month/Day/Year) 09/12/2014									X	Officer below) Chair	(specify () EO			
(Street) BIRMINGHAM AL 35242  (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individue) X	Form f	ial or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
			Tabl	e I - Nor	n-Deriv	ative	Sec	uritie	s Ac	quire	d, Dis	posed o	f, or	Bene	eficia	lly O	wned	ł		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						Execution Date,			Code	Transaction Disposed Of (D Code (Instr. 5)					4 and Second Sec		ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										Code	v	Amount	(	A) or D)	Price	т	Reported Transaction(s) (Instr. 3 and 4)			(iiisti. 4)
Common stock, par value \$0.001 09/12/2					/2014	2014		S		45,36	0	D	D \$13.3		2,251,158		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 Exercis Price of Derivative Security	on se	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,		ransaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Yea		7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)		str. 3	8. Pric Deriva Securi (Instr.	ative dity S 5) E C F	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code			Date Exercis	sable	Expiration Date	of Title Share								

**Explanation of Responses:** 

Alison G. Schmidt, by power of attorney

09/12/2014

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.