FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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UIVID APPR	OVAL
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	ee Instruction 1																		
1. Name and Address of Reporting Person*  THOMPSON C REYNOLDS III				2. Issuer Name and Ticker or Trading Symbol MEDICAL PROPERTIES TRUST INC							(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner							
		rst) (I	Middle)	MPW ]  3. Date of Earliest Transaction (Month/Day/Year) 08/27/2024									Offic below	er (give title v)		Other (s below)	specify		
SUITE 501  (Street) BIRMINGHAM AL 35242				4. If Amendment, Date of Original Filed (Month/Day/Year)							Lin	6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person  Form filed by More than One Reporting							
(City)	(St	ate) (2	Zip)	,											Pers	on			
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or	Bene	eficia	Ily Own	ed			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Date)				Execution Date,					s Acquired (A) or of (D) (Instr. 3, 4 a			and Securities Beneficially Owned Following		Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code V		Amount	(A) or (D)		Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common stock, par value \$0.001 08/27/2					2024 s 20,530 <sup>(1)</sup> D			\$4.3	\$4.38 54,637 D										
		Та	ble II -								osed of, o					d			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Security or Exercise (Month/Day/Year) if any				snsaction de (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		nstr.	8. Price of Derivative Security (Instr. 5)		Ownersh Form: y Direct (D) or Indirec (I) (Instr.	Ownership	Beneficial Ownership t (Instr. 4)			
					Code V		(A)	(D)	Date Exercis	able	Expiration Date	Title	or Nun of Sha	.					

## **Explanation of Responses:**

1. The sale was made in connection with the reporting person's year-end tax planning for 2024. The reporting person intends but is not required to repurchase an equal number of shares, subject to compliance with laws and company policies, as well as then-market conditions.

W. Zachary Riddle, by power of attorney

08/27/2024

\*\* 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.