SEC Form 4
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

	-	-							
	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).	-	pursuant to Section 16(a) of the Securities Exc or Section 30(h) of the Investment Company
1. Name and Address of Reporting Person <sup>*</sup> Hanna James Kevin	r	2. Issuer Name and Ticker or Trading Symbo <u>MEDICAL PROPERTIES TRU</u> MPW ]

## ICIAL OWNERSHIP

change Act of 1934 Act of 1940

1. Name and Address of Reporting Person* <u>Hanna James Kevin</u>	2. Issuer Name and Ticker or Trading Symbol <u>MEDICAL PROPERTIES TRUST INC</u> [ MPW ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below)
(Last) (First) (Middle) 1000 URBAN CENTER DRIVE SUITE 501	3. Date of Earliest Transaction (Month/Day/Year) 01/14/2022	VP, Controller & CAO
(Street) BIRMINGHAM AL 35242	4. If Amendment, Date of Original Filed (Month/Day/Year)	<ul> <li>6. Individual or Joint/Group Filing (Check Applicable Line)</li> <li>X Form filed by One Reporting Person Form filed by More than One Reporting</li> </ul>
(City) (State) (Zip)	ative Securities Acquired, Disposed of, or Benef	Person

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)			4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)				
Common stock, par value \$0.001	01/14/2022		A		3,332(1)	Α	\$ <mark>0</mark>	94,761	D	
Common stock, par value \$0.001	01/14/2022		A		2,417 <sup>(2)</sup>	Α	\$ <mark>0</mark>	97,178	D	
Common stock, par value \$0.001	01/14/2022		F		<b>8,505</b> <sup>(3)</sup>	D	\$23.61	88,673	D	

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	(e.g., puis, cais, warants, options, convertible securities)														
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. Transa Code ( 8)		of Deriv Secu Acqu (A) o Dispe of (D	r osed ) r. 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)		d 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

## Explanation of Responses:

1. Represents additional shares earned under the 2019 performance award based on the Company's actual performance as compared to the performance hurdles defined in the award agreement. The shares vested in January 2022.

2. Represents additional shares earned under the 2021 performance award based on the Company's actual performance as compared to the performance hurdles defined in the award agreement. The shares vested in January 2022.

3. Represents shares withheld by the Issuer to satisfy tax withholding obligations in connection with the common shares vesting (pursuant to our 2019 Equity Incentive Plan) and does not represent a sale by the Reporting Person.

Emily R. Sawyer, by power of 01/19/2022

at<u>torney</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.