FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to	STATEMENT OF
Section 16. Form 4 or Form 5 obligations may continue. See	
Instruction 1(b).	Filed pursua

## F CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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 GOOLSBY BRYAN L  (Last) (First) (Middle)  1000 URBAN CENTER DRIVE					MEDICAL PROPERTIES TRUST INC [ MPW ]  3. Date of Earliest Transaction (Month/Day/Year) 08/18/2005										(Check all ap		ector icer (give title		10% C	Owner (specify
SUITE 5 (Street) BIRMIN (City)	GHAM AI		35242 (Zip)		4. If	Ame	endment,	Date o	of Original	l Filed	l (Month/Da	ay/Ye	ar)		. Indiv ine) X	Form	r Joint/Group n filed by Ond n filed by Mod on	e Rep	orting Pers	on
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)				2. Transa Date (Month/D	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3,			4 and Se		5. Amount of Securities Beneficially Owned Following Reported		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount		(A) or (D)	Price	•	Transaction(s) (Instr. 3 and 4)				
Common	ommon Stock, par value \$0.001 08/18/2005 A 17,500 <sup>(1)</sup> A					A	\$	\$0 17,500		7,500		D								
		Та									sed of, onvertib				y Ov	vned				
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution or Exercise (Month/Day/Year) if any			n Date, ay/Year)	4. Transa Code ( 8)			ative rities ired sed	6. Date Expiration (Month/D		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of Title Shares			nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	F C	10. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

## **Explanation of Responses:**

1. Restricted shares that vest at the rate of 8.33% per quarter beginning on September 30, 2005 and the last day of each calendar quarter thereafter until fully vested.

/s/ Phil Summerlin, Attorney-

in-fact

\*\* Signature of Reporting Person Date

08/22/2005

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.