McKenzie William G Form 4

September 14, 2009

OMB APPROVAL

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

3235-0287 Number:

January 31,

0.5

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Expires: 2005 Estimated average burden hours per

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

response...

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person *

(First)

(Street)

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

McKenzie William G

Symbol

(Middle)

(Check all applicable)

MEDICAL PROPERTIES TRUST

INC [MPW]

_X__ Director 10% Owner

Employee

(Month/Day/Year) 09/14/2009

Officer (give title __X_ Other (specify below) below)

6. Individual or Joint/Group Filing(Check

1000 URBAN CENTER DRIVE, SUITE 501

4. If Amendment, Date Original

3. Date of Earliest Transaction

Filed(Month/Day/Year)

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

BIRMINGHAM, AL 35242

(City)	(State)	(Zip) Tabl	le I - Non-I	Derivative	Secur	ities Acqui	red, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Ownership Beneficially Form: Owned Direct (D) Following or Indirect Reported (I) Transaction(s) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
C			Code V	Amount	or (D)	Price	(Instr. 3 and 4)		
Common Stock, par value \$.001	09/14/2009		S	19,658	D	\$ 7.75	111,973	D	
Common Stock, par value \$.001	09/14/2009		S	1,100	D	\$ 7.755	110,873	D	
Common Stock, par value	09/14/2009		S	1,400	D	\$ 7.7575	109,473	D	

\$.001							
Common Stock, par value \$.001	09/14/2009	S	4,500	D	\$ 7.76	104,973	D
Common Stock, par value \$.001	09/14/2009	S	200	D	\$ 7.765	104,773	D
Common Stock, par value \$.001	09/14/2009	S	100	D	\$ 7.767	104,673	D
Common Stock, par value \$.001	09/14/2009	S	200	D	\$ 7.7675	104,473	D
Common Stock, par value \$.001	09/14/2009	S	1,827	D	\$ 7.77	102,646	D
Common Stock, par value \$.001	09/14/2009	S	300	D	\$ 7.775	102,346	D
Common Stock, par value \$.001	09/14/2009	S	1,000	D	\$ 7.7775	101,346	D
Common Stock, par value \$.001	09/14/2009	S	2,300	D	\$ 7.78	99,046	D
Common Stock, par value \$.001	09/14/2009	S	1,600	D	\$ 7.785	97,446	D
Common Stock, par value \$.001	09/14/2009	S	700	D	\$ 7.7875	96,746	D
Common Stock, par value \$.001	09/14/2009	S	4,015	D	\$ 7.79	92,731	D

Common

Common						
Stock, par value \$.001	09/14/2009	S	100	D	\$ 7.7975 92,631	D

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

Persons who respond to the collection of **SEC 1474** information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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 Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

attorney

Reporting Owner Name / Address	Relationships							
1 6	Director	10% Owner	Officer	Other				
McKenzie William G 1000 URBAN CENTER DRIVE SUITE 501 BIRMINGHAM, AL 35242	X			Employee				
Signatures								
Michael G. Stewart, by power of		09/14/20	000					

Signature of Reporting Person **Explanation of Responses:

- 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).

09/14/2009

Date

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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