

McKenzie William G  
 Form 4  
 September 14, 2009

**FORM 4**

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

OMB APPROVAL

OMB Number: 3235-0287  
 Expires: January 31, 2009  
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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).

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

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

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
 McKenzie William G

2. Issuer Name and Ticker or Trading Symbol  
 MEDICAL PROPERTIES TRUST  
 INC [MPW]

5. Relationship of Reporting Person(s) to Issuer  
 (Check all applicable)

(Last) (First) (Middle)  
 1000 URBAN CENTER  
 DRIVE, SUITE 501  
 (Street)

3. Date of Earliest Transaction  
 (Month/Day/Year)  
 09/14/2009

Director  10% Owner  
 Officer (give title below)  Other (specify below)  
 Employee

BIRMINGHAM, AL 35242

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

(City) (State) (Zip)

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially 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		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)			
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	

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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

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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 information contained in this form are not required to respond unless the form displays a currently valid OMB control number.**

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(9-02)

**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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative 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 Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
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## Reporting Owners

Reporting Owner Name / Address	Relationships			
	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 attorney  
 09/14/2009  
 \*\*Signature of Reporting Person Date

## 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).  
 Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.  
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