Aldag Edward K JR Form 4 January 25, 2019

# FORM 4

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

Check this box if no longer subject to Section 16.

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

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**OMB APPROVAL** 

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January 31,

0.5

Form 4 or 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

1(b).

\$0.001

(Print or Type Responses)

1. Name and Address of Reporting Person * Aldag Edward K JR			2. Issuer Name <b>and</b> Ticker or Trading Symbol MEDICAL PROPERTIES TRUST INC [MPW]				5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)				
(Last)  1000 URBA DRIVE, SU	AN CENTER	⁄Iiddle)	3. Date of Earliest Transaction (Month/Day/Year) 01/23/2019				_X_ Director 10% Owner _X_ Officer (give title Other (specify below) Chairman, President & CEO				
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
BIRMINGHAM, AL 35242								Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tabl	e I - Non-l	Derivative Se	curiti	es Acq	uired, Disposed o	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)		Code (Instr. 3, 4 and 5)			of (D)	5. Amount of Securities Form: Direct Indirect Owned Indirect (I) Ownership Following (Instr. 4) (Instr. 4)  Reported Transaction(s) (Instr. 3 and 4)				
Common stock, par value \$0.001	01/23/2019			Code V	Amount 100,331 (1)	(D)	Price \$ 0	2,184,970	D		
Common stock, par value	01/23/2019			A	131,159 (2)	A	\$0	2,316,129	D		

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

#### Edgar Filing: Aldag Edward K JR - Form 4

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SEC 1474 (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. Transactic Code (Instr. 8)	5. Number of ionDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		<b>D</b> )		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted common stock units	\$ 0	01/23/2019		С		100,331	(3)	(3)	Common stock, par value \$0.001	100,331

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
Treporting Officer France France Con-	Director	10% Owner	Officer	Other			
Aldag Edward K JR 1000 URBAN CENTER DRIVE SUITE 501 BIRMINGHAM, AL 35242	X		Chairman, President & CEO				

## **Signatures**

Emily R. Sawyer, by power of 01/25/2019 attorney

\*\*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).
- (1) Represents shares earned under the 2018 performance award equal to approximately one third of the target number of shares granted.
- Represents additional shares earned based on the Company's actual performance as compared to the performance hurdles defined in the award agreement along with shares earned pursuant to the modifier provisions in the award, which allowed for more shares to be earned
- based on how the Company's relative total shareholder return compared to the SNL Healthcare REIT Index.
- (3) The shares vested on January 1, 2019.

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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