FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washingto STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

- D.C. 20E40	
on, D.C. 20549	OMB APPROVAL

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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)

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* HAGERTY THOMAS				2. Issuer Name and Ticker or Trading Symbol MGIC INVESTMENT CORP [ MTG ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) (First) (Middle) C/O THOMAS H. LEE COMPANY					3. Date of Earliest Transaction (Month/Day/Year) 12/31/2006								Officer (g below)	jive title		10% Owr Other (sp below)	
75 STATE STREET  (Street)  BOSTON MA 02109  (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)								dividual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		7	able I - Non-I	Deriva	tive S	Securities	Acq	uired,	Disp	osed of	f, or Ber	neficially	Owned				
Date			. Transac Oate Month/Da		2A. Deemed Execution Date, if any (Month/Day/Year		Transaction Disposed Code (Instr.		ies Acquire Of (D) (Ins	ed (A) or tr. 3, 4 and 5)	5. Amount Securities Beneficiall Owned Fol	y	6. Own Form: (D) or I (I) (Inst	Direct Ir ndirect B tr. 4) O	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A) o (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				nstr. 4)	
Common Stock													11,8	11,899		D	
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)	rative Conversion Date Execution Date, rity or Exercise (Month/Day/Year) if any		Execution Date,	Code (Instr. ar) 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 Securities Underlyi Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Amount or Number of Shares	Transa (Instr.										
Share Units <sup>(1)</sup>	(2)	12/31/2006		A		255.8363 <sup>(3)</sup>		(4)		Common Stock	255.8363	\$62.54	4,638.8266		D		

- 1. The reporting person participates in the MGIC Investment Corporation Deferred Compensation Plan for Non-Employee Directors under which units corresponding to shares of Common Stock of the Issuer ("Share Units") are acquired through compensation deferral. Dividends which would have been received on shares represented by Share Units are also invested in Share Units. The Share Units are settled in cash, generally at the time the reporting person ceases to be a Director of the Issuer.
- 2. These Share Units do not have a specified dollar-denominated exercise or conversion price. (Their value is based, on a one-for-one basis, on the price of the Issuer's common stock on the New York Stock Exchange.)
- 3. These Share Units were acquired through compensation deferral.
- 4. These Share Units do not become exercisable or expire on a fixed date. (Generally, the Share Units become payable at the time the reporting person ceases to be a Director of the Issuer.)

This Form 4 is being signed by the reporting person's attorney-in-fact pursuant to a previously filed power of attorney.

Dan D. Stilwell, Attorney-in-fact 01/02/2007

\*\* 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.