FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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Check this box if no longer subject to
Section 16. Form 4 or Form 5
bligations may continue. See
antimotion 1/h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
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II	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* <u>CARR CASSANDRA C</u>														ationship of k all applica Director		Person	n(s) to Issue	
(Last) (First) (Middle) C/O MGIC INVESTMENT CORPORATION					3. Date of Earliest Transaction (Month/Day/Year) 02/28/2020									Officer (g	Officer (give title below)		Other (specify below)	
250 EAST KILBOURN AVENUE					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Ind Line)	6. Individual or Joint/Group Filing (Check Applicable					
(Street) MILWAUKEE WI 53202											X	′						
(City)	(5	State)	(Zip)															
		Ta	able I - Non	-Derivat	tive S	ecuritie	s Acc	quired, [Disp	osed o	of, or B	ene	ficially	Owned				
Date			2. Transact Date (Month/Day		2A. Deemed Execution Date, if any (Month/Day/Yea		Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		A) or 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
							Code	Code V		(A)	or	Price	Reported Transactio (Instr. 3 ar	ion(s)		1	(Instr. 4)	
Common Stock													5,000			D		
			Table II - I	Derivativ (e.g., put										wned				
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/Yea	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable at Expiration Date (Month/Day/Year)			7. Title and Amo Securities Unde Derivative Secu (Instr. 3 and 4)		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Nι	nount or imber of iares	er of (I		ion(s)		
Share Units ⁽¹⁾	(2)	02/28/2020		A		192.0899		(4)		(5)	Common	19	92.0899	(3)	30,710.7	7159	D	

Explanation of Responses:

- 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 awarded to the reporting person and/or acquired through compensation deferral.
- 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 phantom dividend reinvestment and no price was paid by the reporting person for the Share Units.
- 4. These Share Units are settled in cash, on a specified date, unless a qualified election for later distribution is made by the reporting person.
- 5. These Share Units do not expire on a fixed date. They will be settled in cash at the time the underlying units are settled.

Remarks:

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

Martha F. Tsuchihashi, Attorney-in-Fact 03/02/2020

** 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.