FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROV	/AL
OMB Number:	3235-0287
Estimated average burden	
hours per response:	0.5

_	Check this box if no longer subject to Section
\cup	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

Name and Address of Reporting Person* Allen Analisa M					2. Issuer Name and Ticker or Trading Symbol MGIC INVESTMENT CORP [MTG]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last)	(First)	(Mi	ddle)		3. Date of Earliest Transaction (Month/Day/Year) 03/05/2024							Officer (give below)	title		Other (sp	pecify below)		
C/O MGIC INVESTMENT CORPORATION 250 EAST KILBOURN AVENUE				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individ	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(Street) MILWAUKEE	WI	53	202	_ F	Rule 10b5-1(c) Transaction Indication													
(City)	(State)	(Zi _l	o)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
			Table I - N	on-De	rivative	e Securit	ies Acc	quired, C	isp	osed of	, or Be	eneficiall	y Owned					
Da			Date	2. Transaction Date (Month/Day/Year)						rities Acquired (A) or Dispo tr. 3, 4 and 5)		isposed Of	5. Amount of Se Beneficially Ow Following Repo	rned Form: orted Indire		: Direct (D) or ect (I) (Instr. 4)	7. Nature of Indirect Beneficial	
						(Month/I	Day/Year)	Code	′	Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				Ownership (Instr. 4)
Common Stock			03/0	03/05/2024		Α		139.086		A	(1)	24,037.6531		D				
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Security (Instr. 3) Conversion or Exercise Price of Derivative Security Conversion of Exercise (Month/Day/Year) if any (Month/Day/Year)		4. Trans Code (In		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		1, , ,		7. Title and Amount of Underlying Derivative (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following	re es ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title		Amount or Number of Shares		Reported Transact (Instr. 4)	ed ction(s)	(
Share Units ⁽²⁾	(3)	03/05/2024		A		25.065		(4)		(5) Common Stock		25.065	(6)	4,331.7	7459	D		

Explanation of Responses:

- 1. Dividends paid on Restricted Stock Units awarded under the Issuer's 2020 Omnibus Incentive Plan. No price was paid by the reporting person for them.
- 2. 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.
- 3. 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.
- 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 are settled in cash on a specified date, unless a qualified election for later distribution is made by the reporting person.
- 6. These Share Units were acquired through phantom dividend reinvestment and no price was paid by the reporting person for the Share Units.

Remarks:

Leslie A. Schunk, Attorney-in-Fact 03/06/2024

** 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.

Limited Power of Attorney

KNOW ALL BY THESE PRESENTS, that the undersigned is required, or may be required in the future, to file reports of changes in beneficial ownership of equity securities of MGIC Investment Corporation (the "Company").

To facilitate the filing of these reports, the undersigned hereby appoints each of Timothy A. Chrapko, Shelby E. Heinrich, Heidi A. Heyrman, Paula C. Maggio, Brian M. Remington, Leslie A. Schunk, and Martha F. Tsuchihashi as the undersigned's attorney-in-fact and agent to (i) apply on behalf of the undersigned for access codes (if necessary) for the EDGAR System, and (ii) sign on behalf of the undersigned and file any Form 3, Form 4, or Form 5 for the undersigned with the Securities and Exchange Commission or any securities exchange.

Each of the persons authorized to act as such attorney-in-fact and agent above may do so separately without the concurrence of the other persons. The authority granted hereunder is granted to the person occupying the position specified at the time such authority is exercised.

Dated: 10/27/21	
Signature: Apoli Allow	
Please print or type name: Analisa M. Alle	n
ACK	NOWLEDGMENT
STATE OF WISCONSIN)	
COUNTY OF MILWAUKEE)	
Analisa M. Allen , knov	te of Wisconsin, on this day personally appeared vn to me to be the person whose name is subscribed to acknowledged to me that he/she executed the same xpressed.
Given under my hand and official seal this 2	day of October, 2021.
(SEAL)	By: Patter Of Feducth Notary Public, State of Wisconsin
	Print Name: Patricia A. Fitchett
PATRICIA A. FITCHETT Notary Public State of Wisconsin	My commission expires: October 03, 2025