FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
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Plan

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	ame and Address of Reporting Person* <u>ughes James J.</u>					2. Issuer Name and Ticker or Trading Symbol MGIC INVESTMENT CORP [MTG]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last)	`	irst)	(Middle))N		3. Date of Earliest Transaction (Month/Day/Year) 03/04/2018 X Office below											(give title	Sales	Other (s below)	specify	
250 EAST KILBOURN AVENUE					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	UKEE W	Т	53202												X		led by Mor		orting Person		
(City)	(S	tate)	(Zip)																		
		Tab	le I - N	lon-Deri	vative	Sec	uriti	es Ac	quired, I	Disp	osed	of, o	r Be	neficia	ally	Owned	i				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		Execution Date,		3. Transact Code (In: 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 and 5)			4 Securities Beneficially Owned		es ally	6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership					
							Code	v	Amoun	nt	(A) or (D)	r Price	•	Following Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)			
Common	nmon Stock		02/10/2018					G	V	6,45	53	D	(1))	245,159			D			
Common	Common Stock		02/10/2018				G	V	6,453		A	(1	(1) 1		04,111		Ι :	By Family Trust			
Common Stock		03/04/2018					F		3,97	79	D	\$13	\$13.86		41,180		D				
Common Stock			03/04/2018				F		4,93	39	D	D \$13.86		236,241			D				
Common	Stock			03/05/2	2018				G	V	10,3	81	D	(1))	225,860 D		D			
Common	Stock			03/05/2	2018				G	V	10,3	81	A	(1))	114	,492	I By Famil Trust		Family	
		Т	able I	l - Deriva (e.g., p					uired, Di , option							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		4. Transac Code (Ir 8)	tion	5. Number		5. Date Exel Expiration I Month/Day	cisa Date	ble and	7. Tit of Se Unde	tle and ecuritie erlying vative s	I Amoun es J Security d 4)	ount 8. of D rity Si	3. Price of Derivative Security Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s illy g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
					Code	v	(A)		Date Exercisable	Ex _I	piration te	Title		Amount or Number of Shares							
Common Stock	(2)								(3)		(4)	Com	1 /	609.72	1		674.229	(5)	I	By Issuer's Profit Sharing & Savings	

Explanation of Responses:

- 1. These securities were transferred from the reporting person to a family trust and no compensation was paid or received for the securities.
- 2. The conversion price varies with the price of the Issuer's common stock. At any given time, the conversion price is equal to the closing price of the Issuer's common stock on the New York Stock Exchange on the previous trading day.
- 3. These derivative securities may be exercised at any time.
- 4. These derivative securities do not have any expiration date.
- 5. Balance as of December 31, 2017

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

03/05/2018 ** 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.