FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL
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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

Name and Address of Reporting Person*													ionship of Reporting Person(s) to Issuer					
CHAPLIN C EDWARD				MGIC INVESTMENT CORP [MTG]						(Chec	k all applica Director	bie)		10% Ow	ner			
(Last) (First) (Middle) C/O MGIC INVESTMENT CORPORATION					3. Date of Earliest Transaction (Month/Day/Year) 02/28/2020						_	Officer (g below)	give title		Other (s below)	pecify		
250 EAST KILBOURN AVENUE				4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable								
(Street) MILWAUKEE WI 53202												Line)		,	•	ting Person One Report	ng	
(City)	(5	State)	(Zip)															
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date				nsaction 2A. Deemed Execution D if any (Month/Day/		Date,	Transaction Dispose Code (Instr.		rities Acquired (A) o ed Of (D) (Instr. 3, 4			5. Amount Securities Beneficial Owned Fo	ly (Form:	Direct I Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership		
							Code	v	Amount	(A) (D)	or	Price	Reported Transaction (Instr. 3 and				(Instr. 4)	
Common Stock														10,000			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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date if any (Month/Day/Ye	Code	action Derivative E		6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Am Securities Unde Derivative Secu (Instr. 3 and 4)		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	re es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)				
	Code V		v	(A)		Date Exercisable			Title	Nu	nount or mber of ares		Transaction(s) (Instr. 4)					
Share Units ⁽¹⁾	(2)	02/28/2020		A		289.7312		(4)		(5)	Common Stock	28	9.7312	(3)	50,727.	1664	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.