FORM 4

obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
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Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
Section 16. Form 4 or Form 5	
abligations may continue Con	

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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>Nicolaisen Donald T</u>					2. Issuer Name and Ticker or Trading Symbol MGIC INVESTMENT CORP [MTG]									k all applica	ionship of Reportinç all applicable) Director		n(s) to Issue 10% Ow	
(Last) MGIC P	`	-irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/16/2008 Officer (give title below) below) Other (specify below)													
250 EAS	T KILBOU	JRN AVENUE		4	1. If Am	endment, Da	ate of	Original F	iled ((Month/Day	/Year)			ividual or Jo	int/Group	Filing (Check Appl	icable
(Street)	UKEE V	VI	53202							Line)								
(City)	(5	State)	(Zip)															
		Ta	able I - Non-	Derivat	ive S	ecurities	Acq	uired, l	Dis	posed of	f, or B	enef	icially	Owned				
Da			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disp			urities Acquired (A) sed Of (D) (Instr. 3, 4			5. Amount Securities Beneficial Owned Fo Reported	ly	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) (D)	or	Price	Transactio (Instr. 3 ar				(Instr. 4)
Common	Stock													16,399 D				
			Table II - D			curities <i>F</i> Ils, warra								wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	se (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 Expiration Date (Month/Day/Year)		е	od 7. Title and Am of Securities Underlying Derivative Sect (Instr. 3 and 4)		curity	Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	or No	mount ımber Shares		(Instr. 4)	ion(a)		
Share Units ⁽¹⁾	(2)	06/16/2008		A		13.6294 ⁽⁴⁾		(3)		(3)	Commo	n 13	3.6294	(4)	5,383.4	143	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
- 3. 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.)
- 4. These Share Units were acquired through phantom dividend reinvestment and no price was paid by the reporting person for the Share Units.

Remarks:

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-06/16/2008

** 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.