FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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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)

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

						_							_							
1. Name and Address of Reporting Person* HAGERTY THOMAS					2. Issuer Name and Ticker or Trading Symbol MGIC INVESTMENT CORP [MTG]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
HAGE.	KII IH	<u>JMAS</u>												X	Directo	or		10% Ow	ner	
(Last)	(Fi	rst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/09/2005									Officer below)	er (give title v)		Other (s	pecify	
C/O THO	OMAS H. L	EE COMPANY			100/	10312	003													
75 STATE STREET					4. 1	If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street)														Line)	Form fi	lad by One	Dono	orting Person		
BOSTO	N M	A	02109											Λ		led by Mor		One Report		
(City)	(St	ate)	(Zip)												F 613011					
		Tab	le I - Non	n-Deriv	ativ	e Se	curities	s Ac	quired,	Dis	posed c	of, or Be	nefic	cially	Owned	<u> </u>				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						Execution [Code (I	Transaction Disposed Of (Code (Instr. 5)			ies Acquired (A) o Of (D) (Instr. 3, 4			es ally Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) o (D)	Pr	ice	Reported Transact (Instr. 3 a	ion(s)		[(Instr. 4)	
Common Stock														9,708		708		D		
		٦	Table II - I (uired, D , option						Owned					
Derivative Conversion Date Executive Security or Exercise (Month/Day/Year)			3A. Deemed Execution E if any (Month/Day	Date, T	4. Transa Code (8)		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4)			3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisabl		Expiration Date	Title	Amo or Num of Shar	ber						
Share Units ⁽¹⁾	(2)	06/09/2005			A		7.3413		(3)		(3)	Common Stock	7.34	113	(4)	3,014.82	285	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 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 Exchange.)
- 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-** Signature of Reporting Person

fact

06/09/2005

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.