Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	VAL
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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1. Name and Address of Reporting Person [*] Zandi Mark					2. Issuer Name and Ticker or Trading Symbol <u>MGIC INVESTMENT CORP</u> [MTG]							ationship of F k all applicab Director		Person	(s) to Issue 10% O\		
	(Last) (First) (Middle) C/O MGIC INVESTMENT CORPORATION 250 EAST KILBOURN AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 01/22/2018								Officer (g below)	ive title		Other (: below)	specify
(Street) MILWA		WI State)	53202 (Zip)	4	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
,		,	(1)														
			Table I - Non	-Derivat	ative S	ecurities Ac	cquir	red, Disp	oosed o	of, or	Bene	ficially C	owned				
1. Title of S	Security (Ins	tr. 3)	Table I - Non	2. Transac Date (Month/Da	ction	ecurities Ac 2A. Deemed Execution Date if any (Month/Day/Yea	e, J. Co	ransaction code (Instr.	4. Secur	ities A	.cquired (-	5. Amount of Securities Beneficially Following F	Owned Reported	6. Own Form: (D) or I (I) (Inst	Direct ndirect	7. Nature of Indirect Beneficial Ownership
1. Title of S	Security (Ins	tr. 3)	Table I - Non	2. Transac Date	ction	2A. Deemed Execution Date if any	e, 3. Tr Co 8)	ransaction code (Instr.	4. Secur	ities A d Of (E	.cquired (A) or	5. Amount of Securities Beneficially	v Owned Reported n(s)	Form: (D) or I	Direct ndirect	Indirect Beneficial
1. Title of S	Security (Ins	tr. 3)	Table II - I	2. Transac Date (Month/Da	ction ay/Year) ive Sec	2A. Deemed Execution Date if any	e, 3. Tr Ca (ar) 8) Ca	ransaction code (Instr.) code V cd, Dispo	4. Secur Dispose Amount	ities A d Of (D	cquired (D) (Instr. 3 (A) or (D) Benefic	A) or 3, 4 and 5) Price cially Ov	5. Amount of Securities Beneficially Following F Transactior (Instr. 3 and	v Owned Reported n(s)	Form: (D) or I	Direct ndirect	Indirect Beneficial Ownership

Explanation of Responses:

(2)(3)

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

2. These Share Units do not have a specified dollar-denominated exercise or conversion price. (Their value is based, on as one-for-one basis, on the price of the Issuer's common stock on the New York Stock Exchange.) 3. These Share Units are settled in cash, on a specified date, unless a qualified election for later distribution is made by the reporting person.

Date Exercisable

02/01/2019⁽⁵⁾

Expiration Date

(6)

Title

Commo

Stock

4. These Share Units were awarded to the reporting person pursuant to the Issuer's Deferred Compensation Plan for Non-Employee Directors and no price was paid by the reporting person for the Share Units.

(A)

6,325.1107

5. These Share Units awarded on this transaction date are settled in cash ten business days after February 1, 2019 unless a qualified election for later distribution is made by the reporting person.

(D)

6. These Share Units do not expire on a fixed date, except that the Share Units awarded on this transaction date and on January 23, 2017 are settled in cash ten business days after February 1, 2019 and 2018, respectively, unless a qualified election for later distribution is made by the reporting person.

Remarks:

Share

Units⁽¹⁾

This Form 4 is being signed by the reporting person's attorney-in-fact pursuant to a power of attorney previously filed.

Dan D. Stilwell, Attoney-in-Fact 01/23/2018

Amount or

Number of Shares

6.325.1107

** Signature of Reporting Person

Date

(4)

Transaction(s)

57,439.6016

D

(Instr. 4)

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).

01/22/2018

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code v

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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.