FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549	
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STATEMENT OF CHANGES IN BEN	EFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-028							
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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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>LEHMAN MICHAEL E</u>					2. Issuer Name and Ticker or Trading Symbol MGIC INVESTMENT CORP [MTG]								Relationship neck all appli X Directo	cable)	g Pers	on(s) to Issi 10% Ov		
	IC INVES	First) FMENT CORPO	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/27/2021							Officer below)	(give title		Other (s below)	pecify	
250 EAST KILBOURN AVENUE				4.	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) MILWAU	JKEE V	VI	53202										X Form filed by One Reporting Person Form filed by More than One Reporting Person			- 1		
(City)	(\$	State)	(Zip)															
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Trans Date (Month/			/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disp Code (Instr. 5)		Dispose	curities Acquired (A) osed Of (D) (Instr. 3, 4		Benefici	es ally Following	Form:	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	mount (A) or (D)		Transact	Transaction(s) (Instr. 3 and 4)			(iiisti. 4)	
Common Stock														37,989			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 Da if any (Month/Day/Y		Transa Code (I		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Yea		of Securities		ties ig e Security	8. Price of Derivative Security (Instr. 5)		e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Co	Code	v	(A)		Date Exercisab		xpiration ate	Title	Amount or Number of Shares		(Instr. 4)	(3)		
Share Units ⁽¹⁾	(2)	05/27/2021			A		39.3557		(4)		(5)	Common Stock	39.3557	(3)	9,497.9	082	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
- 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:

Martha F. Tsuchihashi, 05/28/2021 Attorney-in-Fact

** 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.