FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DC	205/10
wasiiiigton,	D.C.	20549

STATEMENT	OF CHANG	ES IN BENEF	EICIAI (OWNERSHIP
SIAIEMENI	OF CHANG	ES IIN DEINER	-ICIAL (JWINERSHIP

	OMB APP	ROVAL									
	OMB Number:	3235-0287									
	Estimated average burden										
- 1	hours per respense:	0.5									

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

Arrigor (Last)	<u>ni Daniel</u> (F		(Middle)		- <u>M</u>	2. Issuer Name and Ticker or Trading Symbol MGIC INVESTMENT CORP [MTG] 3. Date of Earliest Transaction (Month/Day/Year) 05/29/2020									able)	g Pers	on(s) to Issu 10% Ow Other (s below)	mer	
250 EAS (Street) MILWAU (City)	JKEE W	itate)	53202 (Zip)		-		endment, C							Line)	Form fil Person	ed by One	e Repo	(Check App rting Persor One Repor	,
		Ta	ble I - Nor	ı-Deri	vativ	ve Se	curities	s Acq	γuired,	Disp	osed o	f, or B	ene	ficially	Owned				
1. Title of Security (Instr. 3) 2. Tran Date (Month				2A. Deemed Execution Date, if any (Month/Day/Year		, Transaction Dispose Code (Instr. 5)		Dispose	rities Acquired (A) o			5. Amoun Securities Beneficial Owned Fo	Forn lly (D) o ollowing (I) (II		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount (A)		or	Price	Transaction(s) (Instr. 3 and 4)				, ,
Common Stock												25,000			I 1	By a Family Trust			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any		ate, T	1. Transa	substantial forms of the second of the secon		er of le	6. Date Exercisable and Expiration Date of Secur (Month/Day/Year) (Instr. 3			ind Ai rities ing ve Se	mount	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)			
				Co	Code	v	(A)		Date Exercisab		xpiration ate	Title	or Nu	nount ımber Shares		(Instr. 4)			
Share Units ⁽¹⁾	(2)	05/29/2020			A		51.8296		(4)		(5)	Commo Stock	51	1.8296	(3)	7,445.4	667	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:

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, 06/02/2020 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.