FORM 4

Check this box if no longer subject to

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Machinatan | D C | 205.40 | |
|-------------|------|--------|--|
| Washington, | D.C. | 20549 | |

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response 0.5

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* HOLT TIMOTHY A | | | | | 2. Issuer Name and Ticker or Trading Symbol MGIC INVESTMENT CORP [MTG] | | | | | | | | | ck all applica Director | | | 10% Ow | ner |
|--|---|--|---|-----------------|---|--|---------------------|--|--------|-------------------|----------------|---|---|---|--|-----------------------------------|--|---------------------------------------|
| | IC INVES | First) ΓΜΕΝΤ CORPC | (Middle) PRATION | | 3. Date of Earliest Transaction (Month/Day/Year) 11/25/2020 | | | | | | | | | Officer (below) | give title | | Other (specification) | pecify |
| 250 EAST KILBOURN AVENUE | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. Ind | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) MILWAI | JKEE V | VI | 53202 | | | | | | | | | | X | | , | • | ting Person One Reporti | ng |
| (City) | (: | State) | (Zip) | | | | | | | | | | | | | | | |
| | | T | able I - Non | -Deriva | tive S | ecuritie | s Ac | quired | , Dis | posed (| of, or E | Bene | ficially | Owned | | | | |
| Date | | | 2. Transac Date (Month/Da | Execution Date, | | Date, | Code (Instr. | | | | | A) or 8, 4 and 5) | 5. Amount Securities Beneficial Owned Fo Reported | urities leficially ned Following | | Direct I Indirect E str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | Code | v | Amount | t (A) or (D) | | Price | Transaction(s) (Instr. 3 and 4) | | | | | |
| Common Stock | | | | | | | | | | | | | 20,000 | | | D | | |
| | | | Table II - [| | | curities IIs, warr | | , | • | | , | | - | wned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (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 Exercisal Expiration Date (Month/Day/Year) | | Securities | | es Un ve Se | derlying curity | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transact | re es ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisa | | xpiration Oate | Title | Νu | nount or imber of ares | or (li | (Instr. 4) | .1011(5) | | |
| Share Units ⁽¹⁾ | (2) | 11/25/2020 | | A | | 372.5392 | $ \overline{\ } $ | (4) | | (5) | Commo Stock | | 2.5392 | (3) | 76,619. | 0614 | 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 Exchange.
- 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, 11/30/2020 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.