SEC Form 4	
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FORM 4

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours par roopanaa;	0.5								

11. Nature

Section 16. Form 4 obligations may co Instruction 1(b).		•	File	iled pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940									ted average burder per response:	n 0.5
1. Name and Address of Reporting Person [*] <u>LEHMAN MICHAEL E</u>					Name and Ticker o INVESTME		• •			tionship of Rep all applicable) Director Officer (give	10% (
(Last) C/O MGIC INVE 250 EAST KILBO	(First) STMENT CORPO DURN AVENUE	(Middle) RATION		3. Date of Earliest Transaction (Month/Day/Year) 02/16/2016							below)		below)	
(Street) MILWAUKEE	WI	53202		4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check App X Form filed by One Reporting Perso Form filed by More than One Report			
(City)	(State)	(Zip)												
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
Date			2. Trans Date (Month	saction /Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities A Disposed Of (I			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	orted	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code V		Amount (A) or (D)		Price	(Instr. 3 and 4)			(1130.4)	
Common Stock											22,989		D	
		Table II - I	Deriva	tive Sec	urities Acquir	ed, D	ispo	sed of, or E	Benefic	ially Ow	ned			

(e.g., puts, calls, warrants, options, convertible securities) 3A. Deemed 4. 5. Number of 6. Date Exercisable and 7. Title and Amount of 8. Price of 9. Number of 10. 3. Transaction

s	erivative ecurity nstr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transa Code (8)		Secu Acq Disp	vative urities uired (A) or oosed of (D) tr. 3, 4 and 5)	(Month/Day/Year)		Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	Securities Beneficially Owned Following	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Reported Transaction(s) (Instr. 4)		
	hare Ínits ⁽¹⁾	(2)(3)	02/16/2016		D			11,135.8575	(3)	(3)	Common Stock	11,135.8575	\$6.46	19,049.1363	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.

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 are settled in cash within 10 days after February 1st of the year after which the Share Units were awarded, unless a qualified election for later distribution is made by the reporting person.

Remarks:

1. Title of 2.

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-fact 02/16/2016

** 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.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP