FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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>Karpowicz James A</u>						2. Issuer Name and Ticker or Trading Symbol MGIC INVESTMENT CORP [MTG]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) MGIC P	LAZA	rst) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 02/10/2011										X Officer (give title Other (specify below) Senior Vice President					
(Street)					_ 4.1	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					
MILWAU	MILWAUKEE WI 53202				_													led by Mor	•	One Repo	
(City)	(S		(Zip)		<u> </u>										<u>.</u>						
Table I - Non-Deriv 1. Title of Security (Instr. 3) 2. Trans Date (Month/					saction	ear) i	2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transac Code (I 8)	4. Securities Acquired (A) Disposed Of (D) (Instr. 3,			l (A) or	or 5. Amou Securitie Beneficie Owned F		nt of s ally ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
										Code	v	Amount		(A) or (D)	Price	т	Reported Transact Instr. 3 a	ion(s)			(Instr. 4)
Common Stock 0					02/10/2011							18,198		D	\$8.9	91	157,526		D		
Common Stock																	837.729(1)		I		By Issuer's Profit Sharing and Savings Plan
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. Deeme Execution if any (Month/Day	d Date,	4. Transa Code (8)	ction	5. Number of		6. C	-		ble and 7. T of S Unio		7. Title and Amou of Securities Jnderlying Derivative Securit Instr. 3 and 4)		Deri Sec	rice of ivative urity tr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr.		Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Dat Exe	e ercisable		xpiration ate	Title		Amount or Number of Shares						
Share Units ⁽²⁾	(3)								02/	10/2012 ⁽	1)	(4)		nmon ock	17,900			17,900	0	D	
Employee Stock Options (Right to Buy)	\$63.8									(5)	0	1/23/2012		nmon ock	10,000			10,000	0	D	
Employee Stock Options (Right to Buy)	\$43.7									(5)	0	1/22/2013		nmon ock	7,000			7,000)	D	
Employee Stock Options (Right to Buy)	\$68.2									(5)	0	1/28/2014		nmon ock	7,000			7,000		D	

Explanation of Responses:

- 1. Balance as of December 31, 2010.
- 2. These Share Units correspond to shares of Common Stock of the Issuer. The Share Units are settled in cash if and when they vest.
- 3. 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 average price of the Issuer's common stock on the New York Stock Exchange over a defined period.)
- 4. One-third of these Share Units vest on February 10 of each of the three years beginning in 2012, subject to the reporting person's continued employment with the Issuer.
- 5. All of these options are vested and exercisable in full.

Remarks:

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

** 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.