FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

shington, D.C.	20549
----------------	-------

washington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028		

OMB Number:	3235-0287					
Estimated average burd	en					
hours per response:	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

Name and Address of Reporting Person*			2. Issuer Name and Ticker or Trading Symbol MGIC INVESTMENT CORP [MTG]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
<u>LEHMAN MICHAEL E</u>				11101	<u> </u>	120				<u> </u>			X	Director			10% Ov	/ner	
(Last)	,	irst) TMENT CORPO	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 08/14/2020										Officer (below)	(give title		Other (s below)	pecify
250 EAST KILBOURN AVENUE					If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street) MILWAU	UKEE W	7 I	53202											Line)		,	•	rting Persor One Repor	
(City)	(S	itate)	(Zip)																
		Та	ble I - Non	n-Deriva	ative S	ecuri	ties A	Acqu	ıired,	Dis	posed	d of, or I	Bene	ficially	Owned				
Date				2. Transac Date (Month/Da	eay/Year) if a		2A. Deemed Execution Date, f any Month/Day/Year		Transaction Dispo		urities Acq sed Of (D) (5. Amoun Securities Beneficial Owned Fo Reported	i Ily	Form:	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	V Amou		nt (A) or)	Price	Transaction(s) (Instr. 3 and 4)				,msu. 4)
Common Stock 08/14				08/14/2	/2020			P		8,0	000	A	\$8.4876	37,989			D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion Date Execution Date, Tr Security or Exercise (Month/Day/Year) if any Co			Coc	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		vative irities ired r osed)	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
				Cod	le V	(A)		Date Exerc	cisable	Expi Date	iration	Title		unt or per of es					
Share Units ⁽¹⁾	(2)							((3)		(3)	Common Stock	8,81	3.2935		8,813.2	935	D	

- 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 do not expire on a fixed date. They are settled in cash on specified dates, unless qualified elections for later distribution are made by the reporting person.

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, 08/14/2020 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.