FORM 4

UNITED STATES SECUF

Washington, D.C. 20549

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(MB APPROVAL	

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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

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)						
Zandi Mark											X	Director			10% Owr	er		
(Last) MGIC P	LAZA	First) JRN AVENUE	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/15/2013							Officer (give title below)		Other (specify below)		ecify		
	T KILDOC	OKN AVENOE																
(Street)	UKEE V	WI	53202		4. If Amendment, Date of Original Filed (Month/Day/Year)					6. Indiv	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(State)	(Zip)															
			Table I - Non	ı-Deriv	/ative	Se	curities A	cquii	red, Di	sposed	of, or I	Bene	ficially O	wned				
Date				insaction th/Day/Year)		2A. Deemed Execution Date if any (Month/Day/Yea		Code (Instr.		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 a			Following R	urities neficially Owned lowing Reported		Direct Ir ndirect B r. 4) O	Nature of idirect eneficial wnership	
								ode V	Amour	t ((A) or (D)	Price	Price Transaction(nstr. 4)	
							urities Acc ls, warrant							ned			,	
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/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			Securi Deriva	7. Title and Amount Securities Underlyi Derivative Security 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securiti Benefic Owned Followin Reporte	ve es ially ng	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v			Expiration Date	Title	l N	mount or umber of hares	er of		ea ction(s))				
Share Units ⁽¹⁾	(2)(3)	02/15/2013		С			25,316.4557	02/01	1/2013 ⁽⁴⁾	(5)	Comm		5,316.4557	\$2.75	36,363	3.6364	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, on a specified date, unless a qualified election for later distribution is made by the reporting person.
- 4. The converted Share Units were subject to certain restrictions and vested on February 1, 2013 when such restrictions lapsed.
- 5. These Share Units do not expire on a fixed date. Under certain circumstances, the Share Units are subject to forfeiture if the reporting person ceases to be a Director of the Issuer before the lapse of restrictions on the Share Units.

This Form 4 is being signed and filed on behalf of the reporting person by the reporting person's attorney-in-fact pursuant to a previously filed power of attorney.

Dan D. Stilwell, Attoney-in-Fact 02/15/2013

** 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.