FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington.	$D \subset$	20540
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number:	MB Number: 3235-0287						
Estimated average burden							
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

1. Name and Address of Reporting Person* Poliner Gary A.													5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Politier	Gary A.													X Director			10% Ow	ner
(Last) (First) (Middle) C/O MGIC INVESTMENT CORPORATION					3. Date of Earliest Transaction (Month/Day/Year) 08/26/2021								Officer (below)	give title		Other (s below)	pecify	
			KAHON	L														
250 EAST KILBOURN AVENUE					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)												- 1	X Form filed by One Reporting Person					
MILWAU	JKEE W	VI .	53202										Form filed by More than One Reporting Person					
(City)	(9	State)	(Zip)															
		Ta	able I - Non-	Deriva	tive S	ecuritie	s Ac	quire	d, Di	ispose	ed of	, or Be	neficially	Owned				
Date			. Transac ate Month/Da		2A. Deemed Execution Date, if any (Month/Day/Year		e, Transaction Dispose Code (Instr.			rities Acquired (A) or ed Of (D) (Instr. 3, 4 and		Beneficia Owned Fo	Form ly (D) o		Direct I Indirect I str. 4)	7. Nature of ndirect Beneficial Ownership		
								Со	de V	Amo	ount	(A) or (D)		Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)
			Table II - De			curities Ils, warr								Owned				
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)	Code (Instr.		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)			5	7. Title and Amo Securities Unde Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Beneficie Owned Followin Reported Transact	re es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exerc	sable	Expirat Date		Title	Amount or Number of Shares		(Instr. 4)			
Share Units ⁽¹⁾	(2)	08/26/2021		A		704.1215		(4	1)	(5)		Common Stock	704.1215	(3)	135,367	.2803	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:

Martha F. Tsuchihashi, Attorney-in-Fact

** Signature of Reporting Person Date

08/27/2021

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.