FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO              | JVAL      |
|------------------------|-----------|
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| 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* <u>LANE JEFFREY H</u> |   |  |   |                          |  | 2. Issuer Name and Ticker or Trading Symbol  MGIC INVESTMENT CORP [ MTG ] |   |              |   |                                      |  |   |                      |               |  |  | all appli<br>Directo   | cable)  | g Per  | son(s) to Is<br>10% O<br>Other (                    | wner      |
|--|---|--|---|--------------------------|--|---|---|--------------|---|--------------------------------------|--|---|----------------------|---------------|--|--|--|---|--|---|-----------|
| (Last) (First) (Middle) MGIC PLAZA                             |   |  |   |                          |  |   | 3. Date of Earliest Transaction (Month/Day/Year) 03/12/2010 |              |   |                                      |  |   |                      |               |  |  | below) below)  Executive Vice President  |   |  |   | ,,,,,,    |
| 250 EAS  | ST KILBOU   | JRN AVENUE                                 |   |                          | 4. If  | Am  | endmei  | nt. Da       | te o                                    | f Original                           | Filed  | (Month/D  | av/Ye                | ar)           | 6.                                     | Individ  | dual or  | Joint/Group   | Filino   | g (Check A  | oplicable |
| (Street) MILWAUKEE WI 53202                                    |   |  |   |                          | 4. If Amendment, Date of Original Filed (Month/Day/Year) |   |   |              |   |                                      |  |   |                      |               |  | Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting |  |   |  |   |           |
| (City)   | (S  | itate)                                     | (Zip)   |                          |  |   |   |              |   |                                      |  |   |                      |               |  |  | Persoi   | 1   |  |   |           |
|  |   | Tab  | le I - Noi                                    | n-Deriv                  | ative  | Se  | curit   | ies <i>F</i> | ١co                                     | uired,                               | Dis  | posed (   | of, oı               | Ber           | eficia                                 | ally O   | wne  | ł   |  |   |           |
| 1. Title of Security (Instr. 3)  2. Transa Date (Month/D       |   |  |   |                          | ar)  | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year)               |   |              | 3.<br>Transaction<br>Code (Instr.<br>8) |                                      | 4. Securities Acquired (A)<br>Disposed Of (D) (Instr. 3, 4<br>5) |   |                      |               | 4 and Sec<br>Ber<br>Ow                 |  | mount of<br>urities<br>eficially<br>led Following  |   | wnership<br>n: Direct<br>or Indirect<br>nstr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |           |
|  |   |  |   |                          |  |   |   |              | Î                                       |                                      | v  | Amount (A) or (D)   |                      | Price         | Reporte<br>Transac<br>(Instr. 3        |  | tion(s)  |   |  | (Instr. 4)  |           |
| Common Stock 03/12   |   |  |   |                          | /2010  | 2010  |   |              |   | A                                    |  | 100,00  | 000 <sup>(2)</sup> A |               | \$0                                    | (1)  | 401,939  |   |  | D   |           |
|  |   | 7  | Table II -                                    | Derivat<br>(e.g., p      |  |   |   |              |   |                                      |  |   |                      |               |  |  | vned   |   |  |   |           |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)            | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deeme<br>Execution<br>if any<br>(Month/Da | n Date,<br>ay/Year)<br>- | 4.<br>Transactio<br>Code (Inst<br>8)                     |   | on of E   |              | E (1                                    | . Date Exe<br>xpiration<br>Month/Day |  | and 7. Title and Am<br>of Securities<br>Underlying<br>Derivative Secu<br>(Instr. 3 and 4) |                      | s<br>Security | Deri<br>Seci                           | Price of<br>erivative<br>ecurity<br>nstr. 5)                                       | 9. Number<br>derivative<br>Securities<br>Beneficiall<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | Ownershi<br>Form:<br>ly Direct (D)<br>or Indirec<br>(I) (Instr. 4 | Ownership  | Beneficial<br>Ownership<br>t (Instr. 4)             |           |
|  |   |  |   |                          | Code   | v   | (A)   | (D)          |   | ate<br>xercisabl                     |  | opiration   | Title                |               | Amount<br>or<br>Number<br>of<br>Shares |  |  |   |  |   |           |
| Employee<br>Stock<br>Options<br>(Right to<br>Buy)              | \$57.88   |  |   |                          |  |   |   |              |   | (3)                                  | 0:   | 1/24/2011   | Comi                 |               | 25,000                                 |  |  | 25,000  |  | D   |           |
| Employee<br>Stock<br>Options<br>(Right to<br>Buy)              | \$63.8  |  |   |                          |  |   |   |              |   | (3)                                  | 0:   | 1/23/2012   | Comi                 |               | 40,000                                 |  |  | 40,000  |  | D   |           |
| Employee<br>Stock<br>Options<br>(Right to<br>Buy)              | \$43.7  |  |   |                          |  |   |   |              |   | (3)                                  | 0:   | 1/22/2013   | Comi                 |               | 10,800                                 |  |  | 10,800  |  | D   |           |
| Employee<br>Stock<br>Options<br>(Right to                      | \$68.2  |  |   |                          |  |   |   |              |   | (3)                                  | 0:   | 1/28/2014   | Comi                 |               | 27,000                                 |  |  | 27,000  |  | D   |           |

## **Explanation of Responses:**

- 1. These shares were awarded to the reporting person pursuant to the Issuer's 2002 Stock Incentive Plan and no price was paid by the reporting person for the shares.
- 2. These shares are subject to certain restrictions and vest when such restrictions lapse. One-half of these shares vest on March 1, 2011, one-quarter of these shares vest on September 1, 2011, and the remaining one-quarter of these shares vest on March 1, 2012. All vesting is subject to the reporting person's continued employment by the Issuer at the time of vesting.
- 3. 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.

Dan D. Stilwell, Attorney-infact

03/12/2010

\*\* 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.