FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL										
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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* CHAPLIN C EDWARD					2. Issuer Name and Ticker or Trading Symbol MGIC INVESTMENT CORP [MTG]									ble)) Perso	10% Ow	ner	
(Last)	`	First) ΓΜΕΝΤ CORPC	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/03/2021								Officer (below)	give title		Other (sp	pecify	
250 EAST KILBOURN AVENUE					4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)	UKEE V	VΙ	53202										X		-		ting Person One Reporti	ng
(City)	(9	State)	(Zip)															
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
D			2. Transac Date (Month/Da		2A. Deemed Execution Date, if any (Month/Day/Yea		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			Securities Beneficial	5. Amount of Securities Beneficially Owned Following		Direct I Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount (A) or (D)		or	Price	Transaction(s) (Instr. 3 and 4)				iiisii. 4)	
Common Stock												10,000			D			
	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. Deemed Execution Date, if any (Month/Day/Year	Code (Instr.		Derivative I		6. Date Exercisable an Expiration Date (Month/Day/Year)			7. Title and Amo Securities Under Derivative Secur (Instr. 3 and 4)		erlying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transact	e s 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 Exercisab		xpiration ate	Title		ount or nber of ires		(Instr. 4)			
Share Units ⁽¹⁾	(2)	03/03/2021		A		248.0333		(4)		(5)	Common Stock	24	8.0333	(3)	52,376.	3447	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:

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

Martha F. Tsuchihashi, Attorney-in-Fact 03/04/2021

** 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.