SEC Form 4
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FORM 4

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## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287											
	Estimated average burden										
l	hours per response:	0.5									

Section obligat		•••	•.	••••										nated av s per res	erage burden	0.5			
	tion 1(b).			File							ties Exchar mpany Act			1			per res		0.0
1. Name and Address of Reporting Person <sup>*</sup> Arrigoni Daniel A.						2. Issuer Name and Ticker or Trading Symbol <u>MGIC INVESTMENT CORP</u> [ MTG ]								(Che	elationship o ck all applic Director	able)	ng Pers	on(s) to Issu 10% Ow	
(Last) (First) (Middle) C/O MGIC INVESTMENT CORPORATION 250 EAST KILBOURN AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 08/26/2021									Officer (give title below)		Other (s below)		pecify	
					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) MILWAUKEE WI 53202															Form fi	Form filed by One Report Form filed by More than 0 Person			
(City)	(5	State)	(Zip)																
		Та	ble I - Nor	n-Deriva	ativ	e Se	curitie	s Ac	quired	, Dis	sposed o	of, or	Bene	ficially	Owned				
1. Title of Security (Instr. 3) 2. Trans. Date (Month/I   Common Stock 2. Trans. Date (Month/I				saction /Day/Year)		2A. Deemed Execution Date if any (Month/Day/Ye		Code (Instr						5. Amoun Securities Beneficia Owned Fo Reported	s Ily ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(1	(A) or (D) Price		Transaction(s) (Instr. 3 and 4)				(1130.4)
														25,000				By a Trust	
			Table II -								osed of converti				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 D if any (Month/Day/	ate, Tra Co	ansac de (Ir		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Yea		e	of Sec Under Deriva	7. Title and Ar of Securities Underlying Derivative Sec (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Beneficia Owned Followin Reported Transact	re es ally g d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Cod	de	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Ni	nount umber Shares		(Instr. 4)			
Share Units <sup>(1)</sup>	(2)	08/26/2021		I	1		42.1366		(4)		(5)	Comm		2.1366	(3)	8,100.7	7528	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:

Units<sup>(1)</sup>

Martha F. Tsuchihashi,

Attorney-in-Fact

08/27/2021

\*\* 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.