Instruction 1(b)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: December 31. Expires:

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

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

																	1-				
1. Name and Address of Reporting Person* ENGELMAN DAVID S						2. Issuer Name and Ticker or Trading Symbol MGIC INVESTMENT CORP [MTG]									5. Relationship of Reporting (Check all applicable)						
LINGLEWIAN DAVID 5														_	X	Direc	tor		10% Owne		
(Last)	(Fir	rst) (3. Date of Earliest Transaction (Month/Day/Year) 02/28/2003										Office belov	er (give title v)	de Other (spe below)					
						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)															X Form filed by One Reporting Perso				on		
(City)	(St	(State) (Zip)													Form filed by More than One Reporting Person						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Transaction Code (Instr.					4 and Sec Bei Ow		ount of ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount		(A) or (D)	Pric	e		ed ction(s) 3 and 4)			(Instr. 4)	
Common Stock 02/28						2003				V	861		A	0(1)		7,688(2)		I		By Trust	
Common Stock 02/2					8/2003				G	G V 1,291		(3)	A	0(1)		8,549(2)		I		By Trust	
Common Stock 02/28					28/2003					V	861		D	0(1)		6,600.8		D			
Common Stock 02/28					8/2003				G	V	1,291	(3)	D	0(1)		5,309.8		D			
Common Stock 05/19/						/2003			G V		100		D	0	(1)	5,209.8		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)	Execution		Date, Transa Code (of E		6. Date E Expiratio (Month/D	n Date	•	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)				rative rity 7. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owr Fori Dire or Ir (I) (I	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Nun of Sha	ber							

Explanation of Responses:

- 1. No consideration was paid or received in connection with this gift. Consequently, a price of "\$0" is reported for this gift.
- 2. These shares are owned by a trust of which the reporting person is a trustee and, with members of his immediate family, a beneficiary. The reporting person disclaims beneficial ownership of these shares, except to the extent of his pecuniary interest in the trust.
- 3. These shares are subject to certain restrictions on sale, assignment or other transfer. These restrictions generally expire on February 28, 2006.

Dan D. Stilwell, Attorney-in-

05/21/2003

fact

** 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.