FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP
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OMB APPROVAL

OMB 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/h)

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* SINKS PATRICK					2. Issuer Name and Ticker or Trading Symbol MGIC INVESTMENT CORP [MTG]										Relationship of Reporting Person(s) to Issuer (Check all applicable) Director Officer (give title Other (specify										
(Last) (First) (Middle) MGIC PLAZA						3. Date of Earliest Transaction (Month/Day/Year) 01/22/2005											below)	below) below) Executive Vice President							
250 EAST KILBOURN AVENUE																	6. Individual or Joint/Group Filing (Check Applicable								
(Street) MILWAI	eet) ILWAUKEE WI 53202															Line) <mark>X</mark>	ine) X Form filed by One Reporting Person Form filed by More than One Reportin Person								
(City)	(S	tate)																							
			le I - Nor			_			_		Disp						_								
1. Title of Security (Instr. 3)			2. Trans Date (Month/I		ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		Cc	Transaction Code (Instr.					d (A) c r. 3, 4	or and	5. Amount of Securities Beneficially Owned Following Reported		Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
									Co	Code		Amount		(A) or (D) Price		e	Transac (Instr. 3	tion(s)			(1130.4)				
Common	Stock			01/22/2005						F		484		D	\$6	64.05		86,802		D					
Common	Stock			01/23	01/23/2005					F		543		D	\$6	4.05	36	6,259		D					
Common Stock															1,581.082(1)		I		By Issuer's Profit Sharing and Savings Plan						
		Т	able II -	Deriva (e.g., p	tive S	Secu calls	urities s, wai	s Acc rrant	quired s, opt	d, Dis	spo s, co	sed of onverti	, or ble	Bene secu	ficia	lly C s)	Owned								
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) (Month/Day/Year) 3A. Deem Execution (Month/Day/Year) (Month/Day/Year)				ed 4. 1 Date, Tran Cod		5. Numb of (Instr. Derivativ Securitie Acquirer (A) or Dispose- of (D) (Instr. 3, and 5)		rative prities priced rosed priced priced rosed rosed priced rosed	6. Date Exercisa Expiration Date (Month/Day/Year			of Securities		Amou s Securit	nt 8.	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)					
					Code	v	(A)	(D)	Date Exerc	isable	Ex Da	piration te	Title		Amou or Numb of Share	er									
Employee Stock Options (Right to Buy)	\$46.0625								(2	2)	05	/05/2009	Com		2,00	0		2,000		D					
Employee Stock Options (Right to Buy)	\$45.375								(3	3)	01	/26/2010	Com		16,20	00		16,200		D					
Employee Stock Options (Right to Buy)	\$57.88								(4	4)	01	/24/2011	Com		7,50	0		7,500		D					
Employee Stock Options (Right to Buy)	\$63.8								(5	5)	01	/23/2012	Com Sto		20,00	00		20,000		D					
Employee Stock Options (Right to Buy)	\$43.7								(6	6)	01	/22/2013	Com		20,00	00		20,000		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)	4. Transa Code (8)		of Deriv Secu Acqu (A) o Dispo	r osed) r. 3, 4	6. Date Exerc Expiration Da (Month/Day/\	ate	7. Title an of Securit Underlyin Derivative (Instr. 3 ar	ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Employee Stock Options (Right to Buy)	\$68.2							(7)	01/28/2014	Common Stock	40,000		40,000	D	

Explanation of Responses:

- 1. Balance as of December 31, 2004.
- 2. All of these options are vested and exercisable in full.
- 3. Vesting of these options occurs on January 26 of each of the five years beginning in 2001, at a rate equal to the percent by which the Issuer's earnings per share for the prior fiscal year was of \$31.2, subject to at least a 10% increase in the Issuer's earnings per share from the prior fiscal year, and with any portion of the option which has not been vested at January 26, 2005 becoming vested on January 26, 2009.
- 4. One-fifth of these options vest on January 24 of each of the five years beginning in 2002.
- 5. One-fifth of these options vest on January 23 of each of the five years beginning in 2003.
- 6. One-fifth of these options vest on January 22 of each of the five years beginning in 2004.
- 7. One-fifth of these options vest on January 28 of each of the five years beginning in 2005.

Remarks

The reporting person serves as Executive Vice President - Field Operations of the Issuer's principal operating subsidiary, Mortgage Guaranty Insurance Corporation. This form is signed by the reporting person's attorney-in-fact pursuant to a previously filed power of attorney.

<u>Dan D. Stilwell</u> <u>01/25/2005</u>

** Signature of Reporting Person D

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.