FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

)

STATEMENT OF	CHANGES IN	BENEFICIAL	OWNERSHIP	

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average bur	den								
hours par raspansa:	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

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1. Name and Address of Reporting Person* <u>Meade Michael G</u>						2. Issuer Name and Ticker or Trading Symbol MGIC INVESTMENT CORP [MTG]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below) Senior VP & Chief Info Officer					
(Last) (First) (Middle) MGIC PLAZA 250 EAST KILBOURN AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 02/10/2011															
						4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable															
Street) MILWAUKEE WI 53202				_											Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)		reisuil																
		Tab	le I - No	n-Deriv	ative	Sec	curiti	es A	cqı	uired,	Dis	posed	of, o	Ben	eficia	lly Owne	d				
Date			2. Transa Date (Month/D		2A. Deemed Execution Date, r) if any (Month/Day/Year)		,	Transaction Dis		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 5)				Benefic Owned	es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
										Code	v	Amount	(A) or D)	Price	Reporte Transac (Instr. 3	tion(s)	(Instr. 4)			
Common	Stock			02/10	/2011					F		18,43	9	D	\$8.9	1 12	3,943		D		
Common	Stock															117,36	52.5784 ⁽¹⁾	.5784 ⁽¹⁾ I By Issuer's Profit Sharing and Savings Plan			
		Т														y 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 Date, if any		4. Transaction Code (Instr. 8)		n of E		6. Date Exercise Expiration Date (Month/Day/Yea		sable and 7. te of U		7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		Ownershi Form: Direct (D) or Indirec (I) (Instr. 4		Beneficial Ownership t (Instr. 4)		
					Code	v	(A)			ite ercisabl		expiration	Title	1	Amount or Number of Shares						
Share Units ⁽²⁾	(3)								Г	(4)	1	(4)	Comi		17,900		17,900)	D		
Employee Stock Options (Right to Buy)	\$63.8									(5)	C	1/23/2012	Comi		20,000		20,000)	D		
Employee Stock Options (Right to Buy)	\$43.7									(5)	C	1/22/2013	Comi Sto		13,250		13,250)	D		
Employee Stock Options (Right to Buy)	\$68.2									(5)	C	1/28/2014	Comi		13,250		13,250)	D		

Explanation of Responses:

- 1. Balance as of December 31, 2010.
- 2. These Share Units correspond to shares of Common Stock of the Issuer. The Share Units are settled in cash if and when they vest.
- 3. 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 average price of the Issuer's common stock on the New York Stock Exchange over a defined period.)
- 4. One-third of these Share Units vest on February 10 of each of the three years beginning in 2012, subject to the reporting person's continued employment with the Issuer.
- 5. All of these options are vested and exercisable in full.

Remarks:

The reporting person serves as Senior Vice President - Information Services and Chief Information Officer 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.

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.