Instruction 1(b)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.	C. 20549
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Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP
Section 16. Form 4 or Form 5		•
obligations may continue. See		

ı	OMB APPR	OVAL							
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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

1. Name and Address of Reporting Person* LEHMAN MICHAEL E					2. Issuer Name and Ticker or Trading Symbol MGIC INVESTMENT CORP [MTG]								Relationship on the control of the c	cable) or	g Pers	10% Ov	ner	
	IC INVES	TMENT CORPO	(Middle) ORATION			3. Date of Earliest Transaction (Month/Day/Year) 06/09/2006								Officer below)	(give title		Other (s below)	pecify
250 EAST KILBOURN AVENUE (Street) MILWAUKEE WI 53202												6. Lir	e) X Form f	ividual or Joint/Group Filing (Check Appli Form filed by One Reporting Person Form filed by More than One Reportir			1	
(City)	(:	State)	(Zip)		-									Persor	1			
		Tab	le I - Nor	า-Deriง	vativ	e Se	curities	s Ac	quired,	Dis	posed o	of, or Be	neficia	ly Owned	l			
1. Title of Security (Instr. 3) 2. Trans Date (Month/I				action 2A. Deemed Execution Date Day/Year) if any (Month/Day/Ye		Date,	Code (Instr. 5)				Benefici	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) o (D)	r Price	Transact (Instr. 3	tion(s)			(Instr. 4)	
Common Stock													6,099			D		
		-	Гable II -									, or Ben ble secu		/ Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deeme Execution I if any (Month/Day	Date,	Code (Inst				6. Date Exercisable Expiration Date (Month/Day/Year)		•	nd 7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amount or Number of Shares					
Share	(2)	06/09/2006			A		5.0198		(3)		(3)	Common	5.0198	(4)	1,336.07	26	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 acquired through compensation deferral. Dividends which would have been received on shares represented by Share Units are also invested in Share Units. The Share Units are settled in cash, generally at the time the reporting person ceases to be a Director of the Issuer.
- 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 do not become exercisable or expire on a fixed date. (Generally, the Share Units become payable at the time the reporting person ceases to be a Director of the Issuer.)
- 4. These Share Units were acquired through phantom dividend reinvestment and no price was paid by the reporting person for the Share Units.

Remarks:

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

Dan D. Stilwell, Attorney-in-

fact

** Signature of Reporting Person

Date

06/09/2006

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.