FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washin

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| gton, D.C. 20549 | OMB APPROVAL |
|------------------|--------------|
| | |

| OMB Number: | 3235-0287 |
|-------------------------|-----------|
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| 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(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

| 1. Name and Address of Reporting Person* <u>CULVER CURT S</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol MGIC INVESTMENT CORP [MTG] | | | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
|---|---|--|---|----------------|-----------------------------------|--|--------------|---------|--|--------------------------------|--------------|---------------|---|--|--------------------------|---|---|----------------|--|--|--|--|
| (Last) (First) (Middle) MGIC PLAZA 250 EAST KILBOURN AVENUE | | | | | | Date o | | est Tra | ansactio | on (Moi | nth/D | ay/Year) | | X Officer (give title Other (specify below) Chairman and CEO | | | | | | | | |
| (Street) MILWAUKEE WI 53202 | | | | 4. 1 | f Ame | endmen | it, Date | e of Or | riginal F | iled (| (Month/E | Line | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | | |
| (City) | (S | | (Zip) | | <u> </u> | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) | | | 2. Trans | 2. Transaction | | 2A. Deemed Execution Date, | | te, | Quired, Disposed of, or Benefici 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a code) | | | | | (A) or | or 5. Amount of | | Form (D) o | n: Direct | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | (, | | ` - | | V Amour | | nt (A) or P | | Price | Reported Transact (Instr. 3 a | ion(s) | | | (Instr. 4) | | |
| Common | Stock | | | 01/2 | 8/200 | 9 | | | \neg | D | | 10,0 | 016 D | | \$0 | 579 | 579,338 | | D | | | |
| Common Stock | | | | | | | | | | | | | | | | 12,67 | 12,673.413(1) | | I | By Issuer's Profit Sharing and Savings Plan | | |
| | | - | Table II - | | | | | | | | | | | | | 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 I if any (Month/Day | d 4 Date, T | I. Fransaction Code (Instr. | | 5. Number 6. | | 6. Dat | te Exerc ation D th/Day/ | cisab ate | of Securi | | e and Ai curities lying ative Se | nount | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | e S Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exerc | cisable | Exp Dat | oiration e | Title | or Nu | nount Imber Shares | | | | | | | |
| Employee Stock Options (Right to Buy) | \$46.0625 | | | | | | | | (| (2) | 05/0 | 05/2009 | Comn Stoc | | 5,000 | | 75,000 | 0 | D | | | |
| Employee Stock Options (Right to Buy) | \$45.375 | | | | | | | | (| (2) | 01/2 | 26/2010 | Comn | | 50,000 | | 150,000 | | D | | | |
| Employee Stock Options (Right to Buy) | \$57.88 | | | | | | | | (| (2) | 01/2 | 24/2011 | Comn | | 5,000 | | 75,000 | 0 | D | | | |
| Employee Stock Options (Right to Buy) | \$63.8 | | | | | | | | (| (2) | 01/2 | 23/2012 | Comn | | 20,000 | | 120,00 | 00 | D | | | |
| Employee Stock Options (Right to Buy) | \$43.7 | | | | | | | | (| (2) | 01/2 | 22/2013 | Comn | | 0,000 | | 80,000 | 0 | D | | | |
| Employee Stock Options (Right to Buy) | \$68.2 | | | | | | | | | (2) | 01/2 | 28/2014 | Comn | | 0,000 | | 80,000 | 0 | D | | | |

Explanation of Responses:

2. All of these options are vested and exercisable in full.

Remarks:

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

<u>Dan D. Stilwell, Attorney-in-fact</u> <u>01/28/2009</u>

** 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.