FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinaton	$D \subset$	20540
Washington,	D.C.	20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average bu	ırden								
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* JASTROW KENNETH M II					2. Issuer Name and Ticker or Trading Symbol MGIC INVESTMENT CORP [MTG]								k all applica Director			10% Owi		
(Last) (First) (Middle) C/O MGIC INVESTMENT CORPORATION 250 EAST KILBOURN AVENUE					3. Date of Earliest Transaction (Month/Day/Year) 05/29/2020								Officer (g	give title		Other (sp	pecify	
(Street) MILWAU (City)	JKEE V	VI State)	53202 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)					6. Ind Line) X	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person							
(0.0)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date		2. Transa Date (Month/Da		2A. Deemed Execution Date, if any (Month/Day/Year		r, Transaction Dispos Code (Instr.		n Dispose	rities Acquired (A) ed Of (D) (Instr. 3, 4		A) or , 4 and 5)	or 5. Amoun Securities Beneficial Owned Fo		Form:	Direct II Indirect E str. 4)	7. Nature of ndirect Beneficial Ownership (Instr. 4)		
							Cod	v	Amount	Amount (A) or (D)		Price	Transactio	ransaction(s) nstr. 3 and 4)				
Common Stock													32,698			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/Yea	Code (Instr				6. Date Exercisab Expiration Date (Month/Day/Year)		e	Securities Under		derlying curity	lying Derivative		er of ee es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	e V	(A)	(D)	Date Exercis		Expiration Date	Title	Nu	nount or mber of ares		Transact (Instr. 4)			
Share Units ⁽¹⁾	(2)	05/29/2020		A		267.2503		(4)		(5)	Commo		7.2503	(3)	38,214.	6502	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 awarded to the reporting person and/or acquired through compensation deferral.
- 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 were acquired through phantom dividend reinvestment and no price was paid by the reporting person for the Share Units.
- 4. These Share Units are settled in cash, on a specified date, unless a qualified election for later distribution is made by the reporting person.
- 5. These Share Units do not expire on a fixed date. They will be settled in cash at the time the underlying units are settled.

Remarks:

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

Martha F. Tsuchihashi, 06/02/2020 Attorney-in-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.