FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OIVIB APPROVAL									
OMB Number:	3235-0287								
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0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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*  HAGERTY THOMAS				2. Issuer Name and Ticker or Trading Symbol MGIC INVESTMENT CORP [ MTG ]								k all applica		Perso	n(s) to Issue			
(Last) (First) (Middle) C/O THOMAS H. LEE COMPANY				3. Date of Earliest Transaction (Month/Day/Year) 03/31/2006								Officer (g below)	give title		Other (sp below)	ecify		
(Street) BOSTON		(A tate)	02109 (Zip)		4. If Am	endment, C	Oate o	f Original	Filed	(Month/Da	ıy/Year)		6. Ind Line)	Form file	ed by One	Report	Check Applic ting Person One Reportir	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date			2. Transac Date (Month/Da	Execution Date,		, Transaction Dispose Code (Instr.		rities Acquired (A) or do Of (D) (Instr. 3, 4 and (A) or (D) (D) Price		4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Form:	Direct Ir Indirect B tr. 4) C	. Nature of ndirect leneficial lwnership nstr. 4)			
Common Stock												11,899			D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
Derivative Conversion Date Executive Or Exercise (Month/Day/Year) if an			3A. Deemed Execution Date if any (Month/Day/Ye	Code	nsaction de (Instr. Securities Acquired (A or Disposed of (D) (Instr. 4 and 5)		(A) ed	6. Date Exercisal Expiration Date (Month/Day/Year		)	7. Title and Amo Securities Under Derivative Secur (Instr. 3 and 4)		erlying	rlying Derivative		er of e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Nu	ount or nber of ares		Transaction(s) (Instr. 4)			
Share Units <sup>(1)</sup>	(2)	03/31/2006		A		240.1321		(3)		(3)	Common	24	0.1321	\$66.63 <sup>(4)</sup>	3,884.1	339	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
- 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 compensation deferral.

## 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-</u>

fact

\*\* Signature of Reporting Person

Date

03/31/2006

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.