FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington.	, D.C.	20549

STATEMENT	OF	CHANGES	IN BE	ENEFICIAL	OWNERS	HIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours ner resnonse.	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* Poliner Gary A.														5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Politier	Gary A.			- 1										X	Director			10% Ow	ner
(Last) (First) (Middle) C/O MGIC INVESTMENT CORPORATION					3. Date of Earliest Transaction (Month/Day/Year) 05/27/2021								Officer (below)	give title		Other (s _i below)	pecify		
			RATION																
250 EAS	TKILBOU	JRN AVENUE		4	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street)														Line)	x Form filed by One Reporting Person				
MILWAU	JKEE W	VI	53202												Form filed by More than One Reporting				na
-															Person				
(City)	(9	State)	(Zip)																
		Ta	able I - Non-	Derivat	tive S	ecuritie	s Ac	quire	ed, D	ispo	osed c	of, or I	Bene	eficially	Owned				
Date			action 2A. Deemed Execution Day/Year) if any (Month/Day/		Date	Co	Transaction Dispose Code (Instr.		rities Acquired (A) ed Of (D) (Instr. 3, 4			5. Amount Securities Beneficial Owned Fo Reported	Fori	Form:	Direct I Indirect I tr. 4)	7. Nature of ndirect Beneficial Ownership Instr. 4)			
Code V Am							Amount	(/	A) or D)	Price	Transaction(s) (Instr. 3 and 4)				iiisti. 4)				
			Table II - D			curities IIs, warr									wned		,		
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/Year)	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expira	e Exerc ation D h/Day/	ate	le and	7. Title and Amo Securities Under Derivative Secur (Instr. 3 and 4)		nderlying ecurity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)
				Code	v	(A)	(D)	Date Exerc	isable		piration te	Title	l N	mount or lumber of hares		(Instr. 4)			
Share Units ⁽¹⁾	(2)	05/27/2021		A		555.2537		(4	4)		(5)	Comm		55.2537	(3)	134,001	.3941	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:

Martha F. Tsuchihashi, Attorney-in-Fact

05/28/2021

** 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.