SEC Form 4	
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FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES	AND EXCHANGE	COMMISSION
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Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

obligations may continue. See Instruction 1(b).     Filed pursuant to Section 1(     or Section 20(b) of ti																hours	per respo	nse:	0.5
1. Name and Address of Reporting Person* HOLT TIMOTHY A				2. Is	or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol <u>MGIC INVESTMENT CORP</u> [ MTG ]							all applicable) Director	10% Owner						
	IC INVEST	(First) FMENT CORPC JRN AVENUE	(Middle) DRATION		3. Date of Earliest Transaction (Month/Day/Year) 01/25/2016							Officer (give below)	e title		Other (sp below)	iecify			
(Street) MILWAU	UKEE '	WI	53202		4. If Amendment, Date of Original Filed (Month/Day/Year)					6. Indivi X	ndividual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person								
(City)	(	(State)	(Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date		asaction 2A. Deemed Execution Date if any (Month/Day/Year)		·	3. Transactic Code (Ins 8)				5. Amount of Securities Beneficially ( Following Re	Owned Corner Cor		Direct (D)   I ect (I)   I I)   (	. Nature of ndirect seneficial wnership						
								Code V	,	Amount	(A) or (D) PI		Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned         (e.g., puts, calls, warrants, options, convertible securities)																			
		Transa Code			)	Expiration Date Securit			Title and Amount of ecurities Underlying erivative Security (Ins and 4)		8. Price of Derivative Security (Instr. 5)	ve derivative Securities		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownershi (Instr. 4)				
				Code	v	(A)	(D)		Date Exercisable		Expiration Date	Title	N	mount or umber of hares			action(s)		
Share Units <sup>(1)</sup>	(2)(3)	01/25/2016		A		17,667.8445 <sup>(3)</sup>		0	)2/01/2017 <sup>(4)</sup>		(5)	Comr		7,667.8445	\$0 <sup>(6)</sup>	58,34	7.136	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.

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 are settled in cash, on a specific date, unless a qualified election for later distribution is made by the reporting person.

4. The Share Units awarded on this transaction date are settled in cash ten business days after February 1, 2017 unless a qualified election for later distribution is made by the reporting person.

5. These Share Units do not expire on a fixed date, except that the Share Units awarded on this transaction date and on January 26, 2015 are settled in cash ten business days after February 1, 2017 and 2016, respectively, unless a qualified election for later distribution is made by the reporting person.

6. These Share Units were awarded to the reporting person under the Issuer's Deferred Compensation Plan for Non-Employee Directors and no price was paid by the reporting person for these 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 01/26/2016

\*\* 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.