FORM 4

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

obligations may continue. See

Instruction 1(b)

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington, D.C. 20549				
	a .	20549	DC	/achinaton

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	nd Address of NEY DA	Reporting Person*			Issuer Name and Ticker or Trading Symbol     MGIC INVESTMENT CORP [ MTG ]  3. Date of Earliest Transaction (Month/Day/Year) 03/31/2007									ationship of k all applica Director	ble)	g Perso	10% Ow	ner
(Last) 13 FLIN	(F T STREET	First)	(Middle)								Officer (g below)	give title		Other (s below)	pecify			
(Street)  MARBL	EHEAD N	1A	01945		4. If Amendment, Date of Original Filed (Month/Day/Year)				6. Indi Line)		ed by One	Repor	Check Appl ting Person One Report					
(City)	(\$	State)	(Zip)									, a 2,o.	o andir		g : 0.00			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date			Saction 2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transaction Code (Instr. 8)  4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 and 1)						6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
						Code	v	Amount	(A) (D)	or F	Price	Transactio (Instr. 3 an				msu. 4)		
Common Stock														16,6	77		D	
			Table II - E			curities /								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/Yea	Code (Instr				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amou Securities Underl Derivative Securi (Instr. 3 and 4)		erlying	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Benefici Owned Followin Reporte Transac	ve es ally ng d	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title		ount or ober of res		(Instr. 4)			
Share Units <sup>(1)</sup>	(2)	03/31/2007		P	517.6511 <sup>(3)</sup>			(4)		(4)	Common Stock 517.		7.6511	\$58.92	8,032.	2965	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 Exchange.)
- 3. These Share Units were acquired through compensation deferral.
- 4. 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.)

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

Joseph J. Ziino, Jr., Attorney-in-04/02/2007

\*\* 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.