## FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: Estimated average burden 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 purcuant to Section 16(a) of the Securities Evolution Act of 1024

	don I(b).											pany Act									
1. Name and Address of Reporting Person*  Karpowicz James A						2. Issuer Name and Ticker or Trading Symbol MGIC INVESTMENT CORP [ MTG ]										5. Relationship of Reporting (Check all applicable)  Director  Officer (give title			Person(s) to Issuer  10% Owner Other (specify		
(Last) (First) (Middle) MGIC PLAZA 250 EAST KILBOURN AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 02/15/2008										X below		ce Pr	below)	opeo., j	
(Street) MILWAUKEE WI 53202					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)										5. Individual 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-Deriva  1. Title of Security (Instr. 3)  2. Transa Date (Month/D						ear) if	2A. Deemed Execution Date, if any (Month/Day/Year)			3. 4. Secu Transaction Dispos Code (Instr. 5)			of, or Beneficia rrities Acquired (A) or ed Of (D) (Instr. 3, 4 an			5. Amo Securi Benefic Owned	5. Amount of Securities Beneficially Owned Following Reported		n: Direct	7. Nature of Indirect Beneficial Ownership	
										Code	v	Amount		(A) or (D)	Price	Transa	ed ction(s) 3 and 4)			(Instr. 4)	
Common Stock 02					/15/2008				4	D		908		D	\$0	6.	2,424		D	_	
Common Stock																837	837.729 <sup>(1)</sup>		I	By Issuer's Profit Sharing and Savings Plan	
		Т	able II - I (									sed of				/ Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	d Date,	4. Transa Code ( 8)	ection	5. Number 6.		6. D	S. Date Exercisab Expiration Date Month/Day/Year)		ole and 7. Title of Secu		le and Amount ecurities erlying		8. Price of Derivative Security (Instr. 5)	rivative derivative curity Securitie	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat Exe	e ercisable		piration tte	Title	0 N	mount r lumber f shares						
Employee Stock Options (Right to Buy)	\$45.375									(2)	01	/26/2010	Com		5,850		5,850	)	D		
Employee Stock Options (Right to Buy)	\$57.88									(3)	01	/24/2011	Com		6,250		6,250	)	D		
Employee Stock Options (Right to Buy)	\$63.8									(3)	01	/23/2012	Com		0,000		10,000	0	D		
Employee Stock Options (Right to Buy)	\$43.7									(4)	01	/22/2013	Com		7,000		7,000	)	D		

### **Explanation of Responses:**

Employee Stock Options (Right to Buy)

1. Balance as of December 31, 2007.

\$68.2

2. Partial vesting of these options occurred on January 26 of each of the five years beginning in 2001, based on certain performance standards. Any portion of the option which did not vest at January 26, 2005 will become vested on January 26, 2009 based on the reporting person's continued service to the Issuer.

(5)

Common Stock

01/28/2014

7,000

7,000

D

3. All of these options are vested and exercisable in full.

- 4. One-fifth of these options vest on January 22 of each of the five years beginning in 2004.
- 5. One-fifth of these options vest on January 28 of each of the five years beginning in 2005.

#### Remarks:

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

Dan D. Stilwell, Attorney-in-Fact 02/15/2008

\*\* Signature of Reporting Person Date

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.