FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIF							
STATEMENT OF CHANCES IN BENEFICIAL CONNENSIII	STATEMENT	OF C	HANGES	IN BENI	EFICIAL	OWNER	SHIP

OMB APPROVAL								
OMB Number:	3235-0287							
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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

Name and Address of Reporting Person* Nicolaisen Donald T				2. Issuer Name and Ticker or Trading Symbol MGIC INVESTMENT CORP [MTG]										k all applica Director	,		10% Ow	ner		
(Last)	•	First) TMENT CORPO	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/04/2014										Officer (g below)	give title		Other (sp below)	pecify	
250 EAS	T KILBOU	JRN AVENUE			4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Ind Line)	6. Individual or Joint/Group Filing (Check Applicable					
(Street) MILWAUKEE WI 53202														X	,				ng	
(City)	(5	State)	(Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Da			Date	ransaction e onth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispo			urities Acq sed Of (D) (5. Amount Securities Beneficial Owned Fo Reported	Form (D) o		: Direct I r Indirect I str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amou	unt (A) or Prid		Price	Transactio	ansaction(s) nstr. 3 and 4)					
Common Stock			03/04/2	1/2014			S		40,	,000	D	\$9.0241	26,3	,399		D				
Table II - Derivati (e.g., pu									,	•		,		•	wned					
Security or Exercise (Month/Day/Year) if any		Code	nsaction of de (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ative rities ired osed	6. Date Exercisable and Expiration Date (Month/Day/Year)			and	7. Title and Amount of Securities Underlying Derivative Security (I 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
				Code			Date Exerc	isable	Expiration Date		Title	Amou Numb Share	er of							
Share Units ⁽¹⁾	(2)(3)							02/01/	1/2015 ⁽⁴⁾		[5)	Common Stock	66,2	70.0294		66,270.0	294	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 specified date, unless a qualified election for later distribution is made by the reporting person.
- 4. The Share Units are subject to certain restrictions and vest on February 1, 2015.
- 5. These Share Units do not expire on a fixed date. Under certain circumstances, the Share Units are subject to forfeiture if the reporting person ceases to be a Director of the issuer before the lapse of restrictions on the 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-

** Signature of Reporting Person

Fact

03/04/2014

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.