FORM 4

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
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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											934	_		11	ated avera	age burden inse:	0.5	
1. Name and Address of Reporting Person [*] HOLT TIMOTHY A					2. Issuer Name and Ticker or Trading Symbol <u>MGIC INVESTMENT CORP</u> [MTG]								onship of Re all applicable Director	porting Person(s) to Issuer) 10% Ov			ner	
(Last) MGIC P 250 EAS	(First) (Middle) PLAZA AST KILBOURN AVENUE				3. Date of Earliest Transaction (Month/Day/Year) 01/30/2012							-	Officer (giv below)	e title	Other (s below)		pecify	
(Street) MILWAU	UKEE	WI		4. If Amendment, Date of Original Filed (Month/Day/Year)							6. 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 - No								·							
Date			nsaction 2A. Deemed Execution Date if any (Month/Day/Yea			Code (Instr.			and 5)	5. Amount of Securities Beneficially (Following Re	For Ily Owned or I Reported (Ins		Direct (D) rect (I) 4)	7. Nature of Indirect Beneficial Ownership				
							-	Code V	Amount	(A) (D)	or	Price		ransaction(s) Instr. 3 and 4)		(Instr. 4)		
			Table II -			Securities , calls, warr			· ·	,				ed				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	e (Month/Day/Year)	Execution Date,	4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amou Securities Underl Derivative Securi 3 and 4)		erlying	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownershi (Instr. 4)
				Code	v	(A)	(D)	Date Exe	e ercisable	Expiration Date	Title		ount or Iber of res		Reported Transaction(s) (Instr. 4)			
Share Units ⁽¹⁾	(2)	01/30/2012		A		25,316.4557 ⁽³⁾		02/0	01/2013 ⁽⁴⁾	(5)	Common Stock	25,3	316.4557	\$0 ⁽⁶⁾	25,31	6.4557	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 awarded on this transaction date are subject to certain restrictions, and vest when such restrictions lapse. The restrictions lapse on February 1, 2013.

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.

6. These Share Units were awarded to the reporting person pursuant to the Issuer's Deferred Compensation Plan for Non-Employee Directors and no price was paid by the reporting person for 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-Fact 01/30/2012

** 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.