### Edgar Filing: Poliner Gary A. - Form 4

Poliner Gary	А.									
Form 4	010									
October 01, 20									PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANG Washington, D.C. 20549							COMMISSIO		3235-0287	
Check this if no longe subject to Section 16 Form 4 or Form 5 obligations may contir <i>See</i> Instruct 1(b).	r STATEN	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								
(Print or Type Re	esponses)									
1. Name and Address of Reporting Person <u>*</u> Poliner Gary A.				er Name <b>and</b> INVESTN		-	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) C/O MGIC II CORPORAT KILBOURN	3. Date of Earliest Transaction (Month/Day/Year) 09/30/2018				Director Officer (giv below)	Director 10% Owner Difficer (give title Other (specify below)				
				endment, Danth/Day/Yea	-	1	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
MILWAUKE	EE, WI 53202						Form filed by Person	More than One R	eporting	
(City)	(State)	(Zip)	Tab	ole I - Non-I	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deeme Execution any (Month/Da(Instr. 3)any (Month/Da		Date, if	Date, if TransactionAcquired (A) Code Disposed of y/Year) (Instr. 8) (Instr. 3, 4 ar (A) o		(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Reminder: Repor	rt on a separate line	for each cl	ass of sec				or indirectly			

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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/Year)	4. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Share Units (1)	<u>(2)</u>	09/30/2018		А	901.5778		(4)	(4)	Common Stock	901.5778

### **Reporting Owners**

Reporting Owner Name / Address

Relationships
Director 10% Owner Officer Other

Poliner Gary A. C/O MGIC INVESTMENT CORPORATION 250 EAST KILBOURN AVENUE MILWAUKEE, WI 53202

# Signatures

Martha F. Tsuchihashi, Attorney-in-Fact

10/01/2018 Date

# **Explanation of Responses:**

\*\*Signature of Reporting Person

- \* 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).

(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 by the reporting person through, among other ways, compensation deferral. Dividends which would have been received on shares represented by the Share Units are also invested in Share Units. The Share Units will be settled in cash, on the first business day following the distribution date.

- (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 acquired through compensation deferral.
- (4) These Share Units do not become exercisable on a fixed date or expire. (Generally, the Share Units become payable at the time the reporting person ceases to be a Director of the Issuer.)

#### **Remarks:**

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.