FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL							
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## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

1. Name and Address of Reporting Person* Bushek Jared Joseph	2. Date of Event Requiring Statement (Month/Day/Year) 09/01/2020		3. Issuer Name and Ticker or Trading Symbol  MGE ENERGY INC [ MGEE ]							
(Last) (First) (Middle) 623 RAILROAD STREET PO BOX 1231  (Street) MADISON WI 53701- 1231  (City) (State) (Zip)	09/01/2020		Issue (Che	Director	10% Owl Other (specify below)	ner	6. Indiv (Check X R	idual or Joint/C Applicable Lir orm filed by O deporting Persorm filed by M one Reporting	Group Filing ne on ore than	
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)		- 1	2. Amount of Securities Beneficially Owned (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
MGEE Common Stock		392.5073		D						
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
I. Title of Derivative Security (Instr. 4) 2. Date Exercisabl Expiration Date (Month/Day/Year)		ate	e and 3. Title and Amount Securities Underly Derivative Securit		ying Cor y (Instr. 4) or E		nversion Exercise	5. Ownership Form:	6. Nature of Indirect Beneficial	
	Date Exercisable	Expira Date	ation	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	Ownership (Instr. 5)		

Explanation of Responses:

/s/ Jared Joseph Bushek 09/01/2020

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).