П

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPR									
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

1. Name and Address of Reporting Feison		on [*]	2. Issuer Name and Ticker or Trading Symbol <u>FIRST BUSEY CORP /NV/</u> [BUSE]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Powers John	<u>Joseph</u>				Director	10% Owner			
,				$-\mathbf{x}$	Officer (give title	Other (specify			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)		below)	below)			
	. ,	()	01/29/2016		EVP & General	l Counsel			
100 WEST UNI	VERSITY AVEN	IUE							
			4. If Amendment, Date of Original Filed (Month/Day/Year)	6 Indix	/idual or Joint/Group Filir	ng (Check Applicable			
(Street)			. In Americanent, Bate of Original Filed (Montal Bay, Tear)	Line)		ig (oneck Applicable			
CHAMPAIGN	IL	61820		X	Form filed by One Re	porting Person			
					Form filed by More than One Report				
(City)	(State)	(Zip)			Person				
	(otato)	(ビマ)							

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)				5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
			Code	v			Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)		
Common Stock	01/29/2016		A		160(1)	A	\$ <mark>0</mark>	20,888	D			
Common Stock	12/31/2015		А		31 ⁽²⁾	A	\$0	3,922	I	Employee Stock Purchase Plan		
Common Stock	12/31/2015		A		1,877 ⁽³⁾	A	\$0	14,237	Ι	401(K) & P/S Plan		

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

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

													1	1	
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. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Da (Month/Day/Y	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Represents dividend equalent rights accrued on Restricted Stock Units in conjuncation with the payment of a cash dividend on First Busey Corporation Stock. Each dividend equivalent right is the economic

equivalent of one share of First Busey Corporation Stock.

2. Reflects 31 accumulated dividend reinvestment shares through the Company Employee Stock Purchase Plan since the Reporting Person's most recent ownership report.

3. Reflects allocations, contributions and dispositions that have occured since the Reporting Person's most recent ownership report.

Remarks:

/s/ John Joseph Powers

** Signature of Reporting Person

"" Signature of Reporting

<u>02/01/2016</u> 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.