

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

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

OMB APPROVAL	
OMB Number:	3235-0287
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1. Name and Address of Reporting Person * <u>KUHL BARBARA J</u>  (Last) (First) (Middle) <u>101 GREENCROFT DR.</u>  (Street) <u>CHAMPAIGN IL 61821</u>  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>FIRST BUSEY CORP /NV/ [ BUSE ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <u>President - First Busey Corp.</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>11/18/2005</u>	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person

**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. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common <sup>(1)</sup>	11/18/2005		M		11,250	A	\$11.92	132,510	D	
Common <sup>(2)</sup>	11/18/2005		S		11,250	D	\$20.5	121,260	D	
Common	11/18/2005		S		17,215	D	\$20.5	104,045	D	
Common								14,176.7539	I	ESOP Plan
Common								6,573.8721	I	401(k) Profit Sharing Plan
Common <sup>(1)</sup>	11/18/2005		M		11,250	A	\$11.92	156,154.031	I	Spouse
Common <sup>(2)</sup>	11/18/2005		S		11,250	D	\$20.5	144,904.031	I	Spouse
Common								25,470.939	I	Spouse ESOP Plan
Common								9,127.1802	I	Spouse 401(k)/Profit Sharing Plan

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

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. Transaction Code (Instr. 8)		5. Number of Derivative 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 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				
Stock Option	\$11.92	11/18/2005		X			11,250	01/15/2002	12/15/2005	Common Stock	11,250	\$11.92	0	D	
Stock Option	\$19.59							09/14/2007	09/14/2009	Common Stock	23,000		23,000	D	
Stock Option	\$14.56							04/16/2005	12/16/2010	Common Stock	30,000		30,000	D	
Stock Option	\$11.92	11/18/2005		X			11,250	01/15/2002	12/15/2005	Common Stock	11,250	\$11.92	0	I	Spouse
Stock Option	\$19.59							09/14/2007	09/14/2009	Common Stock	23,000		23,000	I	Spouse
Stock Option	\$14.56							04/16/2005	12/16/2010	Common Stock	30,000		23,000	I	Spouse

**Explanation of Responses:**

- 1. Exercise of Stock Option
- 2. Sale of Stock Option

/s/ Barbara J. Kuhl

11/18/2005

\*\* Signature of Reporting Person

Date

\* 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.**