Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. 20549 |
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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

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

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

| Name and Address of Reporting Person* Jones Jeffrey David | | | | 2. Issuer Name and Ticker or Trading Symbol FIRST BUSEY CORP /NV/ [BUSE] | | | | | | | | | Chec | k all app Direc | licable) | ing Person(s) to 10% (| | | |
|---|--|--------------------|--|--|---|---|---|------------------------------------|--|--------------------|--|----------------|--|-------------------------|---|--|--|---|---------------------------------------|
| (Last) (First) (Middle) 100 WEST UNIVERSITY AVENUE | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/30/2022 | | | | | | | | X | | below) EVP & | | below | |
| (Street) | AIGN | IL 6 | 51820 | | 4. If A | ment, [| Date o | 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) | | | Zip) | | ļ | | | | | | | | | | | | | | |
| | | | I - No | | | 1 | | | 1 | , Dis | posed of | • | | | | | | | |
| | | | 2. Transaction Date (Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | 4 and Securiti | | es ally Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | Price | 9 | Transac (Instr. 3 | tion(s) | | | (Instr. 4) |
| Common Stock | | | 07/29/2 | 07/29/2022 | | | | A | | 577(1) | A | \$ | 0 | 63,119 | | | D | | |
| Common | Common Stock | | | | 06/30/2022 | | | | A | | 41 ⁽²⁾ | A | \$ | 0 | 4,032 | | | I | Employee Stock Purchase Plan |
| Common Stock | | | | | | | | | | | | | | 6 | 00 | | | Alexa IRA | |
| | | Та | ble II - | | | | | | | | osed of, convertib | | | - | Owne | d | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercis Price of Derivative Security | e (Month/Day/Year) | if any | emed ion Date, Transa Code (A) (Code (A) (Code (A) (A) (Code (A) (A) (Code (A) | | Instr. | nstr. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Expirat (Month | tion Da //Day/Y | Securities Underlying Derivative Security (Inst 3 and 4) Expiration Securities Underlying Derivative Security (Inst 3 and 4) | | int of ities rlying ative ity (Instr. 4) Amount or Number | De Se (In | Price of trivative curity str. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | e s lly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership (Instr. 4) |

Explanation of Responses:

- 1. Represents dividend equivalent rights accrued on Restricted Stock Units in conjunction 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 41 accumulated dividend reinvestment shares through the Company Employee Stock Purchase Plan since the Reporting Person's most recent ownership report.

/s/ Mary Lakey, attorney-in-

08/02/2022

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** 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.