FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinatan	D C	20540	
Nashington,	D.C.	20049	

STATEMENT	OF CHANGES	S IN BENEFICIAL	OWNERSHIP

OMB APPROVAL											
OMB Number: 3235-0											
Estimated average burden											
hours per response	e: 0.5										

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

1. Name and Address of Reporting Person* <u>Cassens Michael David</u>					2. Issuer Name and Ticker or Trading Symbol FIRST BUSEY CORP /NV/ [BUSE]										o of Reportir licable) tor	ng Per	rson(s) to Is		
(Last)	(Fi	rst) (ľ	Middle	e)		3. Date of Earliest Transaction (Month/Day/Year) 02/15/2024									Office	er (give title v)		Other (s below)	pecify
100 WEST UNIVERSITY AVENUE					4. If /	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)													X		filed by One		Ü		
CHAMP.	IAMPAIGN IL 61820													Form Perso	filed by Moi on	re thar	n One Repo	orting	
(City)	(S	tate) (2	Zip)		Ru	Rule 10b5-1(c) Transaction Indication						on							
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Table	I - N	Non-Deriva	tive S	Secui	rities	Ac	quire	ed, Dis	sposed c	of, or l	Benefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye			Execution if any		on Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			nd 5) Secu Bene Own		rities Fo ficially (D ed Following Ind		n: Direct	7. Nature of Indirect Beneficial Ownership		
									Code	V A	mount	(A) or (D)	Price			saction(s) : 3 and 4)		r. 4)	Instr. 4)
Common	Stock			02/15/202	.4					2,300	D	\$23.02	11(2)	141,278		278 D			
	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)	Exe if an	Deemed cution Date, ly nth/Day/Year)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Expiration Date (Month/Day/Year) Amount Security Underly Derivati Security 3 and 4)			unt of rities erlying rative rity (Instr. i 4)	Der Sec	rice of vative urity tr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (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 Exe	e rcisable	Expiration Date	1 Title	Amount or Number of Shares						

Explanation of Responses:

- 1. The stock sale reported on this Form 4 was effected pursuant to a Rule 10b5-1 trading plan adopted on May 25, 2022.
- 2. The price reported above reflects the weighted average sale price. The sale was executed in multiple trades at prices ranging from \$22.76 to \$23.20, inclusive. The reporting person undertakes to provide the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the shares sold at each separate price within the range set forth in this footnote (2) to this Form 4.

Remarks:

/s/ Catherine Alqallaf, attorney-in-fact

02/16/2024

** 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.