FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Vashington, | D.C. 20549 | |
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| 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

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

| 1. Name and Address of Reporting Person* <u>Jones Jeffrey David</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol FIRST BUSEY CORP /NV/ [BUSE] | | | | | | | | | heck all ap Dire | | J | 10% (| | | |
|---|--|-------|-----------------------|---|---------|--|---|------------------------------|---|-----------------|--|-----------------------|---|--|---------------------|---|--|--|--|--|--|
| (Last) 100 WES | ST UNI | (Firs | st) (I SITY AVENUI | Middle) E | | 3. Date of Earliest Transaction (Month/Day/Year) 01/25/2023 | | | | | | | | | X belo | w) ` | % CF | below | | | |
| (Street) CHAMPAIGN IL 61820 | | | | | | 4. If A | 4. If Amendment, Date 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) | | (Sta | | Zip) | | ļ | | | | | | | | | | | | | | | |
| | | | | I - No | | | 1 | | | | , Dis | posed of, | | | | | | | | | |
| Date | | | | 2. Transact Date (Month/Day | | Execu | 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 Securities Beneficially Owned Followin | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | | | |
| Common | Common Stock 01/25 | | | | 01/25/2 | 2023 | 023 | | | A | | 1,464(1) | Α | \$0 | 6.5 | 65,546 | | D | | | |
| Common | Stock | | | | | | | | | | | | | | 4 | 4,106 I Employ Stock Purchas Plan | | | | | |
| Common | Stock | | | | | | | | | | | | | | | 600 I Alexa IRA | | | | | |
| | 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) | vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any | | | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Expirat (Month | ion Da | | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | e s illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership ct (Instr. 4) | | | | |
| | | | | | | Code | v | (A) | (D) | Date Exercis | sable | or Numl Expiration of | | lumber | | | | | | | |

Explanation of Responses:

1. Represents a grant of Performance Stock Units for which performance-based vesting requirements were confirmed to have been satisfied by the Board of Directors of the issuer on January 25, 2023.

/s/ Mary Lakey, attorney-in-

fact

** Signature of Reporting Person Date

02/01/2023

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.