### FORM 5

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

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Machineton	D C	20540
Vashington,	D.C.	20549

# ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0362							
Estimated average burd	en							
hours per response:	1.0							
	OMB Number: Estimated average burd							

Form 3 Holdings Reported.

X Form 4	Transactions F	Reported.	Fil	ed pursuant to or Sectio					urities Excha Company Ad									
1. Name and Address of Reporting Person* SHROYER CHRISTOPHER M					2. Issuer Name and Ticker or Trading Symbol FIRST BUSEY CORP /NV/ [ BUSE ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
(Last) (First) (Middle) 100 WEST UNVIERSITY AVENUE					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2012						X	belov	cer (give title w) esident & CEO B		belo	,		
(Street) CHAMPAIGN IL 61820				4. If Amer	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)	(51		(Zip) 	vative Sec	uriti	es A	cauire		isposed	of. or l	Benefic	ially	/ Owne	ed				
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.		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)				ed 5. Amo Securit Benefic		ınt of es ially	6. Ownership Form: Direct (D) or		7. Nature of Indirect Beneficial Ownership		
			(months age)	(MOIIIII/Day/Teal)		0)		unt	(A) or (D)	Price		Issuer's Fiscal In		Indir (Inst	ect (I)	(Instr. 4)		
Common	Common Stock		12/31/2012			A		(	602(1)	A \$0			1,067			I	ESOP Plan	
Common Stock		12/31/2012			A		6	,699 <sup>(1)</sup>	A	\$ <mark>0</mark>	13		3,398		I	401(k) & P/S		
Common Stock 12		12/31/2012			A4		3	,393(2)	A \$0			53,971			D			
		Ta	able II - Deriva (e.g., p	tive Secur uts, calls,									Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		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)		Expiration (Month/Da		Exercisable and ion Date /Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Price of rivative curity str. 5)  Beneficia Owned Following Reported Transacti (Instr. 4)		Ownersh Form: Direct (D or Indirect (I) (Instr.		Beneficial Ownership ct (Instr. 4)	
					(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares							
Common Stock	\$16						03/19/	2003	03/18/2013	Stock Option	4,650			4,650		D		
Common Stock	\$16.03						04/16/	2003	04/15/2013	Stock Option	1,550			1,550		D		
Common Stock	\$19.74						02/18/	2004	02/17/2014	Stock Option	6,200			6,200	) D			
Common Stock	\$19.09						02/16/	2005	02/15/2015	Stock Option	6,200			6,200		D		
Common	¢10.41						02/22/	2006	02/21/2016	Stock	6 200	T		6 200		D		

#### Explanation of Responses:

- 1. Reflects allocations, contributions and dispositions that have occurred since the Reporting Person's most recent ownership report.
- $2.\ Includes\ 3,393\ shares\ of\ accumulated\ dividend\ equivalents\ on\ Restricted\ Stock\ Units\ not\ previously\ reported.$

# Remarks:

<u>/s/ Christopher M. Shroyer</u>
\*\* Signature of Reporting Person

02/14/2013 Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $^{\star}$  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.