FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, I | D.C. | 20549 |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| | tion 1(b). | nuc. See | | Filed | | | | | | | ties Exchang mpany Act o | | f 1934 | | l nou | rs per r | esponse: | 0.5 | |
|--|--|----------|--|---|----------------|---|--------|------|--|--------|---|--------|---|---|---|----------|---------------------------------------|-----|--|
| 1. Name and Address of Reporting Person* Bowe Monica L (Last) (First) (Middle) 100 WEST UNIVERSITY AVENUE | | | | | | 2. Issuer Name and Ticker or Trading Symbol FIRST BUSEY CORP /NV/ [BUSE] 3. Date of Earliest Transaction (Month/Day/Year) 03/23/2022 | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below) EVP Chief Risk Officer | | | | | |
| (Street) CHAMP (City) | AIGN IL | | 1820 Zip) | | 4. If <i>i</i> | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Table | I - No | n-Deriva | ative \$ | Secu | rities | Acc | uired | , Dis | posed of | , or B | enefic | ially Own | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | Execution Date, | | Oate, | 3. Transaction Code (Instr. 8) | | | | | | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | | Code | v | Amount | (A) c | Price | Transac | action(s) 3 and 4) | | | ,, | | |
| Common | Stock | | 03/23/2022 A 4,847 ⁽¹⁾ A \$ 0 30,999 D | | | | D | | | | | | | | | | | | |
| Common Stock | | | | | | | | | | | | | 7 | 725 | | I | Employee Stock Purchase 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) | vative Conversion Date urity or Exercise (Month/Day/Year) Execution Date, if any | | | Transaction Code (Instr. 8) Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Expiration Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4) Amount or Number of Title Shares | | 8. Price of Derivative Security (Instr. 5) Security Reporte Transac (Instr. 4) | | e s ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership (Instr. 4) | | | | |

Explanation of Responses:

1. Represents a grant by the Board of Directors of Restricted Stock Units which vest after five years.

/s/ Mary Lakey, attorney-in-

** Signature of Reporting Person

03/25/2022

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.