SEC Form 4	
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OWB APPRC	IVAL
OMB Number:	3235-0287
Estimated average burde	en
hours per response:	0.5

1. Name and Address of Reporting Person* <u>Mooney Howard F</u>			2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>FIRST BUSEY CORP /NV/</u> [BUSE ]	(Check	son(s) to Issuer 10% Owner Other (specify	
(Last) 100 WEST UNI	(First) VERSITY AVEN	(Middle) UE	3. Date of Earliest Transaction (Month/Day/Year) 03/31/2017	X	Officer (give title below) President & CEO Fi	below)
(Street) CHAMPAIGN (City)	IL (State)	61820 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line) X	ridual or Joint/Group Filing Form filed by One Repo Form filed by More thar Person	orting Person

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	ecurity (Instr. 3) 2. Transaction Date (Month/Day/Year) 2. A. Deemed Execution Date, if any (Month/Day/Year) 3. Transaction Code (Instr. 8)			4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
			Code	v	Amount	(A) or (D) Price		Transaction(s) (Instr. 3 and 4)					
Common Stock	04/28/2017		A		169 <sup>(1)</sup>	Α	\$ <mark>0</mark>	34,999	D				
Common Stock	03/31/2017		Р		164 <sup>(2)</sup>	A	\$ <mark>0</mark>	1,004	I	Employee Stock Purchase Plan			
Common Stock								2,590	I	IRA			
Common Stock								477	I	Profit Sharing/401(k)			
Common Stock								210	I	ESOP			

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

(e.g., puts, cails, 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	ate, Transac Code (Ir		of		ction of Instr. Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		Expiration Da	6. Date Exercisable and Expiration Date (Month/Day/Year)		and nt of ties ying tive ty (Instr. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (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 Exercisable	Expiration Date	Title	Amount or Number of Shares						

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 the purchase of 164 shares and 5 accumulated dividend reinvestment shares through the Company Employee Stock Purchase Plan since the Reporting Person's most recent ownership report.

<u>/s/ Mary Lakey, attorney-in-</u> <u>fact</u>	05/01/2017
** 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.