LYKINS GREGORY B

Form 4 June 23, 2010

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB

Check this box

Number: 3235-0287

OMB APPROVAL

if no longer subject to Section 16. Form 4 or Expires: January 31, 2005

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

LYKINS GREGORY B			Symbol				Issuer					
			FIRST BUSEY CORP /NV/ [BUSE]				l (C	(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Manth/Day/Veen)			•						
100 WEST UNIVERSITY			(Month/Day/Year) 06/22/2010				X_ Director 10% Owner Officer (give title Other (specify below)					
	(Street)			4. If Amendment, Date Original			6. Individual or Joint/Group Filing(Check					
CHAMPAI	Filed(Month/Day/Year) CHAMPAIGN, IL 61820					Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(State)	(Zip)	Tabl	e I - Non-I	Derivative	Securi	ties Ac	ies Acquired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Executio any		3. Transaction Code (Instr. 8)	4. SecurionAcquired Disposed (Instr. 3,	(A) or l of (D) 4 and 5 (A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Stock Common Stock								81	I	ESOP Plan		
Common Stock								61,401	I	IRA		
Common Stock								6,718	I	Margo Lykins/IRA		
Reminder: Re	port on a separate li	ne for each c	lass of secu	rities benef	icially own	ned dire	ectly o	r indirectly.				

Persons who respond to the collection of

information contained in this form are not

SEC 1474

(9-02)

Edgar Filing: LYKINS GREGORY B - Form 4

required to respond unless the form displays a currently valid OMB control number.

8. F Der Sec (Ins

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Common Stock	\$ 11.29					08/01/2007	03/20/2011	Stock Option	8,138
Common Stock	\$ 12					08/01/2007	03/19/2012	Stock Option	7,750
Common Stock	\$ 16					08/01/2007	03/18/2013	Stock Option	7,750
Common Stock	\$ 19.74					08/01/2007	02/17/2014	Stock Option	7,750
Common Stock	\$ 19.09					08/01/2007	02/15/2015	Stock Option	7,750
Common Stock	\$ 19.41					08/01/2007	02/21/2016	Stock Option	7,750
Common Stock	\$ 17.12					05/01/2009	12/15/2015	Stock Option	7,500
Common Stock	\$ 7.53					06/01/2010	06/30/2019	Stock Option	7,500
Common Stock	\$ 4.49	06/22/2010		A	7,500	06/01/2011	06/01/2021	Stock Option	7,500

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
LYKINS GREGORY B 100 WEST UNIVERSITY CHAMPAIGN, IL 61820	X						

Reporting Owners 2

Signatures

/s/ Gregory B. 06/23/2010 Lykins

**Signature of Date
Reporting Person

Explanation of Responses:

- * 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Signatures 3