BIOTIME INC Form 4 March 05, 2015

FORM 4

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

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 OF **SECURITIES**

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

(Print or Type Responses)

(Last)

1. Title of

Security

(Instr. 3)

1. Name and Address of Reporting Person *

SEGALL JUDITH

(First) (Middle)

1301 HARBOR BAY PARKWAY

(Street)

ALAMEDA, CA 94502

2. Issuer Name and Ticker or Trading

Symbol

BIOTIME INC [BTX] 3. Date of Earliest Transaction

(Month/Day/Year) 03/03/2015

4. If Amendment, Date Original Filed(Month/Day/Year)

OMB APPROVAL

OMB Number:

3235-0287

Expires:

January 31, 2005

Estimated average burden hours per

response...

0.5

5. Relationship of Reporting Person(s) to

Issuer

(Check all applicable)

_X__ Director 10% Owner X_ Officer (give title Other (specify

below) Vice President & Secretary

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

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

below)

(City) (State) (Zip)

(Month/Day/Year)

2. Transaction Date 2A. Deemed 3.

Execution Date, if (Month/Day/Year)

Code

4. Securities TransactionAcquired (A) or (Instr. 8)

Disposed of (D) (Instr. 3, 4 and 5)

5. Amount of Securities Beneficially Owned Following Reported

Form: Direct (T) (Instr. 4)

6. Ownership 7. Nature of Indirect

(D) or Indirect Beneficial Ownership (Instr. 4)

(9-02)

(A) Transaction(s) (Instr. 3 and 4) Code V Amount (D) Price

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

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

1. Title of Derivative Security

Conversion or Exercise

3. Transaction Date 3A. Deemed (Month/Day/Year) Execution Date, if any

4. 5. Number of **Transaction**Derivative Code Securities

6. Date Exercisable and **Expiration Date** (Month/Day/Year)

7. Title and Amount of **Underlying Securities** (Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8	or] (D) (In	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)					
				Code '	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option to Purchase Common Shares	\$ 4.23	03/03/2015		A	50	0,000		<u>(1)</u>	03/02/2025	Common Shares	50,000
Option to Purchase Common Shares	\$ 3.51							<u>(2)</u>	03/19/2021	Common Shares	50,000
Option to Purchase Common Shares	\$ 4.22							(3)	02/19/2020	Common Shares	50,000

Reporting Owners

Reporting Owner Name / Address	Relationships							
reporting 6 wher rume, riddress	Director	10% Owner	Officer	Other				
SEGALL JUDITH 1301 HARBOR BAY PARKWAY ALAMEDA, CA 94502	X		Vice President & Secretary					

Signatures

/s/Judith Segall 03/05/2015

**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).
- One quarter of the options shall vest upon the completion of 12 months of continuous employment from the date of grant and the balance (1) shall vest in 36 monthly installments upon the completion of each month of continuous employment from the first anniversary of the date of grant.
- (2) 1/48th of the number of options will vest and become exercisable at the end of each full month of employment after March 20, 2014.
- (3) 1/48th of the number of options will vest and become exercisable at the end of each full month of employment after January 1, 2013.

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.

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