Instruction 1(b)

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, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

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

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

Name and Address of Reporting Person* WAITZ HAROLD D				2. Issuer Name and Ticker or Trading Symbol BIOTIME INC [BTX]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
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BERKELEY CA 94710														X Form filed by One Reporting Person						
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(City)	(S	tate)	(Zip)												Persor					
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(Instr. 3) Price of Derivative Security (Month/Day/Year) 8)					°'		Securities Acquired					(Instr. 3 and 4)				шу	Direct (D) or Indirect	Ownership (Instr. 4)		
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Purchase	\$2	I	1					1	01/21/2004	+ O	1/14/2007	Share		,758 ⁽³⁾	I	7,758	رد	D	1	

Explanation of Responses:

- 1. Includes 2,362 shares beneficially owned by Dr. Waitz's minor children, 130,000 shares that Dr. Waitz may acquire through the exercise of stock options, and 7,758 shares that he may acquire through the exercise of certain warrants.
- 2. 12,500 options became exercisable on June 1, 2004 and the remaining 37,500 options will become exercisable in three equal yearly installments.
- 3. Includes 130 warrants beneficially owned by Dr. Waitz's minor children.

Remarks:

Shares

/s/ Harold D. Waitz

06/03/2004

** 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.