## FORM 5

Check this box if no longer subject to

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

washington, D.C. 20043	Washington,	D.C. 20549	
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ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP** 

wasnington, D.C. 20549

OMB APPROVAL										
OMB Number:	3235-0362									
Estimated average hi	ırden									

hours per response:

1.0

$\neg$	Section 16. Form 4 or Form 5	
_	obligations may continue. See	
	Instruction 1(b).	

Form 3 Holdings Reported.

Form 4	Transactions F	Reported.	Fil	ed pursuant to or Sectio					urities Excha Company Ac											
1. Name and Address of Reporting Person*  WEST MICHAEL D					2. Issuer Name <b>and</b> Ticker or Trading Symbol BIOTIME INC [ BTIM ]							Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner								
(Last) (First) (Middle) 1301 HARBOR BAY PARKWAY					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2009								X Officer (give title Other (specify below) below)  Chief Executive Officer							
(Street) ALAMEDA CA 94502				4. If Amer	4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person								
(City)	(St	tate)	(Zip)										F 61301							
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)				2A. Deemed Execution I if any	2A. Deemed Execution Date,		<u> </u>			osed 5. Amou Securitie Beneficia		of ly	6. Ownership Form: Direct		7. Nature of Indirect Beneficial Ownership					
				(Month/Day	/ Year)	8)		Amo	unt	(A) or (D)	Price	Issuer's Fiscal   Indirect (I)   (Inst				(Instr				
Common Shares, no par value								ļ				0(1)		D						
		T	able II - Deriva (e.g.,	ative Secu puts, calls					•			-	Owned							
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. Transaction Code (Instr. 8)	5. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instr and 5	rative rities ired r osed	6. Date E Expiratio (Month/D	Exercisable and on Date of Securities Underlying		7. Title and Amou of Securities Underlying Derivative Securi			8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitic Benefici Owned Followir Reporte Transac (Instr. 4)	ve Owner es Form: ally Direct or Indi ng (I) (Insi d tion(s)		D) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					(A)	(D)	Date Exercisa	ble	Expiration Date	Title	Amou or Numb of Share	er								
Option to Purchase Common Shares	\$1.26						(2)		03/30/2010	Commo Shares	<sup>1</sup> 20,00	00		20,0	000	D		D		
Option to Purchase Common Shares	\$0.34						(3)		03/27/2011	Commo Shares	<sup>1</sup> 20,00	00		20,0	000	D		D		
Option to Purchase Common Shares	\$0.74						(4)		04/30/2012	Commo Shares	n 20,00	00		20,0	D,000 D					

## **Explanation of Responses:**

\$0.5

- 1. Excludes 1,560,000 shares that Dr. West may aquire through the exercise of stock options.
- 2. 5,000 options became exercisable on March 31, 2005 and the remaining 15,000 became exercisable in 3 equal quarterly installments based upon continued service on the board of directors.
- 3. 5,000 options became exercisable on March 31, 2006 and the remaining 15,000 became exercisable in 3 equal quarterly installments based upon continued service on the board of directors.
- 4. 5,000 options became exercisable on May 1, 2007 and the remaining 15,000 became exercisable in 3 equal quarterly installments based upon continued service on the board of directors.
- 5. 1/60th of the number of options will vest at the end of each full month of employment after October 10, 2007.

## Remarks:

Option to Purchase

Common

/s/ Michael D. West

\*\* Signature of Reporting Person

Common

Shares

10/09/2014

1,500,000

02/12/2010

1,500,000

D

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.