	UNITED STA	ATES SECURITIES A Washington, D			SSION						
FORM 5 Check th subject Form 5 o See Inst Form 3 H Form 4 H	OMB APPROVAL OMB Number: 3235-0287 Expires: September 30, 1998 Estimated average burden hours per response1.0										
(Print or	Type Responses)										
	STATEMEN	T OF CHANGES IN B	BENEFICIA	OWNERSH	IP						
Act	of 1934, Section	to Section 16(a) n 17(a) of the Pu ion 30(f)of the I	blic Util	lity Hold	ing Company Act						
1. Name and Address of Reporting Person*			 Issuer Name and Ticker or Trading Symbol Relationship of Reporting Person(s) BioTime, Inc. (BTIM) to Issuer (Check all applicable) 								
Segall (Last)	Judith (First)	M. (Middle)	3.	IRS or S Number	Inc. (BTIM) Social Security of Reporting (Voluntary)		ement forX_ n/Year	_ Director _ Officer(giv	e 10% Owner e Other) specify below)		
935 Pardee (Street)	Street		5.	If Amen					oint/Group Filing		
Berkeley (City)	CA (State)	94710 (Zip)			Original h/Year)		_X_Fo Fo	Check Applicab orm filed by O orm filed by M Reporting Pers	ne Reporting Person ore than One		
(Inst	r.3)	. Trans- 3. action Date (Month/ Day/ Year)	Trans- action Code (Instr. 8	3)	Securities Acqu or Disposed of Instr. 3, 4 and (A)or Amount (D)	(D)	Amount of Securities Beneficially Owned at End of Issuer' Fiscal Year Inst. 3 and 4)	Indirect	 Nature of Indirect Beneficial Ownership Instr. 4) 		
Common Sha no par val	res, ue	6/98					192,537	D			
Common Sha no par val	res, ue	6/98					517,377	I	owned by spouse		
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). (Over) SEC 2270(7-97)											
FORM 5 (co	ntinued)										
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
	f Derivative Sed str. 3)	curity 2. Conver sion o Exerci Price Deri- vative Securi	or .se of e	Trans- action Date (Month/ Day/ Year)	4. Trans- action Code (Instr. 8)	ative quire posed	r of Deriv- Securities Ac- d (A) or Dis- of (D) . 3, 4 and 5) (D)	Exer-	and on y/ Expir- ation		
								cisable	Date		

7. Title and Amount of Underlying Securities (Instr. 3 and 4)			Price of Deriv- ative Secur- ity	9.	Number of deriv- ative Secur- ities Bene-	10	10.0wner- ship Form of Deriv- ative Security:	11.	Nature of Indirect Benefi- cial Owner-
Title	Amount or Number of Shares		(Instr. 5)		ficially Owned at End of Year (Instr. 4)		Direct (D)or Indirect (I) (Instr. 4)	(ship Instr.4)

Explanation of Responses:

** 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 valid OMB Number.

/s/Judith M. Segall **Signature of Reporting Person 8/03/98 Date _ _ _ _ _ _ _ _ _ _ _ _ _ _ _