UNITED STATES
SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM 8-K

CURRENT REPORT

Pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934

Date of Report (date of earliest event reported): **April 29, 2015**

BioTime, Inc.

(Exact name of registrant as specified in its charter)

California	**1-12830**	**94-3127919**
(State or other jurisdiction of incorporation)	(Commission File Number)	(IRS Employer Identification No.)

1301 Harbor Bay Parkway
Alameda, California 94502
(Address of principal executive offices)

(510) 521-3390
(Registrant's telephone number, including area code)

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions:

☐ Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)
☐ Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)
☐ Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))
☐ Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))

Forward-Looking Statements

Any statements that are not historical fact (including, but not limited to statements that contain words such as "may," "will," "believes," "plans," "intends," "anticipates," "expects," "estimates") should also be considered to be forward-looking statements. Additional factors that could cause actual results to differ materially from the results anticipated in these forward-looking statements are contained in BioTime's periodic reports filed with the Securities and Exchange Commission ("SEC") under the heading "Risk Factors" and other filings that BioTime may make with the SEC. Undue reliance should not be placed on these forward-looking statements which speak only as of the date they are made, and the facts and assumptions underlying these statements may change. Except as required by law, BioTime disclaims any intent or obligation to update these forward-looking statements.

This Report and the accompanying Exhibit 99.1 shall be deemed "furnished" and not "filed" under the Securities Exchange Act of 1934, as amended.

Section 7 - Regulation FD

Item 7.01 - Regulation FD Disclosure

On April 29, 2015, our Chief Executive Officer Michael D. West, Ph.D. will provide an update on regenerative medicine product development underway at BioTime and its subsidiaries at the GTCbio 4th Stem Cell Product Development & Commercialization Conference in Boston, MA. Dr. West's presentation will include the information in the slides attached to this report as Exhibit 99.1.

Section 9 - Financial Statements and Exhibits

Item 9.01 - Financial Statements and Exhibits.

Exhibit Number	Description
99.1	Slide presentation

SIGNATURES

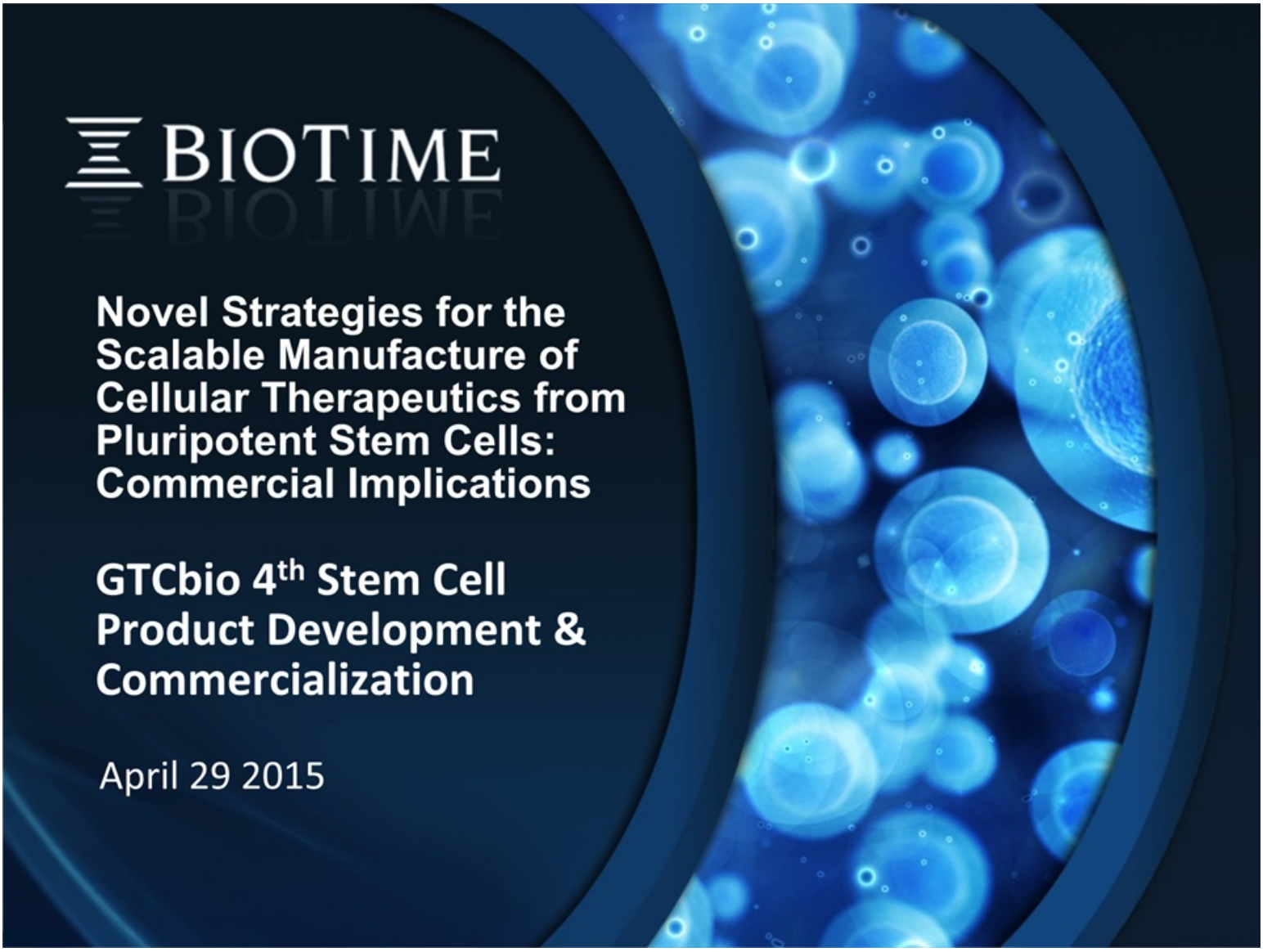
Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

BIOTIME, INC.

Date: April 29, 2015

By: s/Michael D. West
Chief Executive Officer

Exhibit 99.1


BIOTIME
Novel Strategies for the Scalable Manufacture of Cellular Therapeutics from Pluripotent Stem Cells: Commercial Implications
GTCbio 4th Stem Cell Product Development & Commercialization
April 29 2015

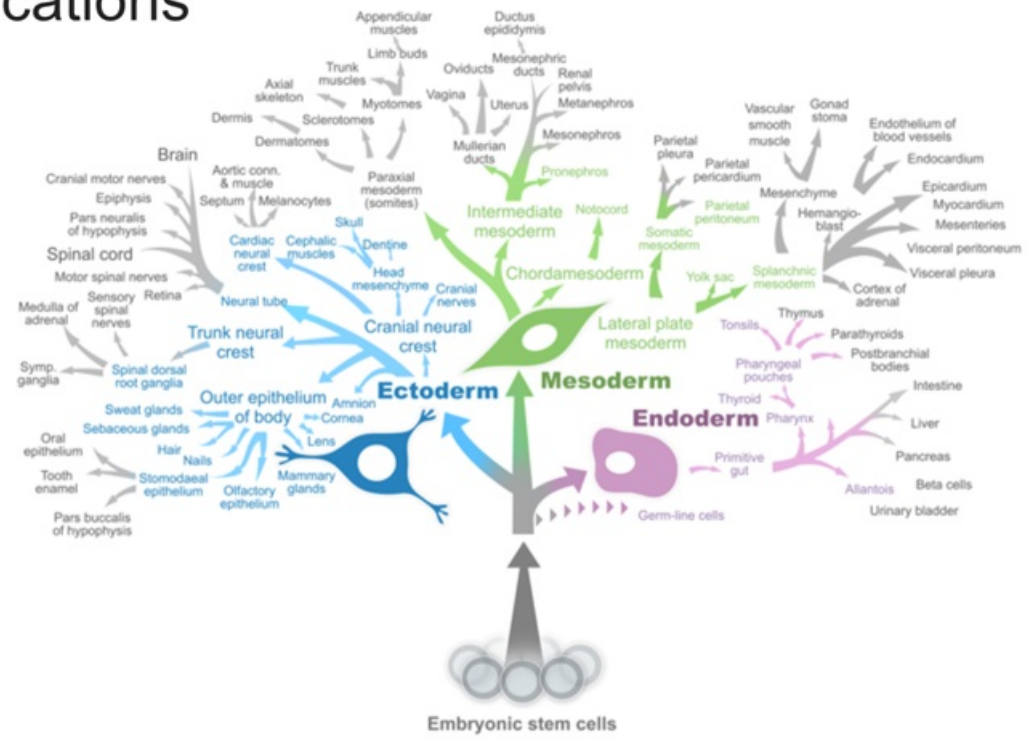
Safe Harbor Statement

The matters discussed in this presentation include forward looking statements which are subject to various risks, uncertainties, and other factors that could cause actual results to differ materially from the results anticipated. Such risks and uncertainties include but are not limited to the success of BioTime in developing new stem cell products and technologies; results of clinical trials of BioTime products; the ability of BioTime and its licensees to obtain additional FDA and foreign regulatory approval to market BioTime products; competition from products manufactured and sold or being developed by other companies; the price of and demand for BioTime products; and the ability of BioTime to raise the capital needed to finance its current and planned operations. Any statements that are not historical fact (including, but not limited to statements that contain words such as "will," "believes," "plans," "anticipates," "expects," "estimates") should also be considered to be forward-looking statements. Forward-looking statements involve risks and uncertainties, including, without limitation, risks inherent in the development and/or commercialization of potential products, uncertainty in the results of clinical trials or regulatory approvals, need and ability to obtain future capital, and maintenance of intellectual property rights. As actual results may differ materially from the results anticipated in these forward-looking statements they should be evaluated together with the many uncertainties that affect the business of BioTime and its subsidiaries, particularly those mentioned in the cautionary statements found in BioTime's Securities and Exchange Commission filings. BioTime disclaims any intent or obligation to update these forward-looking statements.

The Opportunity in Pluripotency

BIOTIME

- Scalable source of all human cell types
- Immortal substrate allowing complex genetic modifications

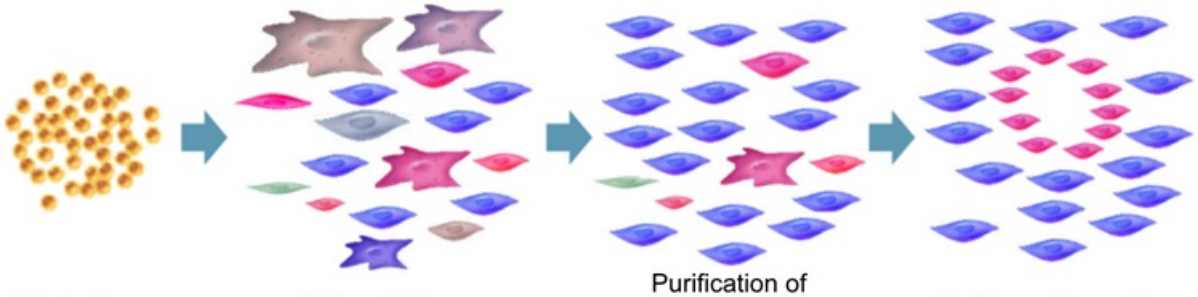


Manufacturing Technology 1.0

BIOTIME

The Challenge

Traditional Manufacture



OPC1: Previous Phase 1 Trial

Feasible and Safe

- Five subjects received 2 mil *OPC1* cells, followed for >4 years
- Clean safety profile observed to date:
  - No serious adverse events related to surgery, *OPC1*, or immunosuppression
  - No unexpected neurological changes
  - No adverse changes on MRI
  - Monitoring through one year shows no evidence of immune responses to *OPC1*
- Potential evidence of biological activity:
  - MRI results in 4 of 5 subjects are consistent with prevention of lesion cavity formation

Current Phase 1/2a Trial

ASTERIAS BIOTHERAPEUTICS

Indication:
Complete Cervical Spinal Cord Injury

- High level of unmet medical need – no approved therapies, high level of disability & lifetime cost of care
- Clear path to market – endpoint measurements and pivotal study size established by SCOPE initiative

Objectives:
Safety and preliminary efficacy

- Establish safety of *OPC1* in cervical sensorimotor complete SCI
- Assess effects on upper extremity motor function
- Investigate effects on additional measures of neurological function

Trial Design:
Sequential cohort, dose escalation

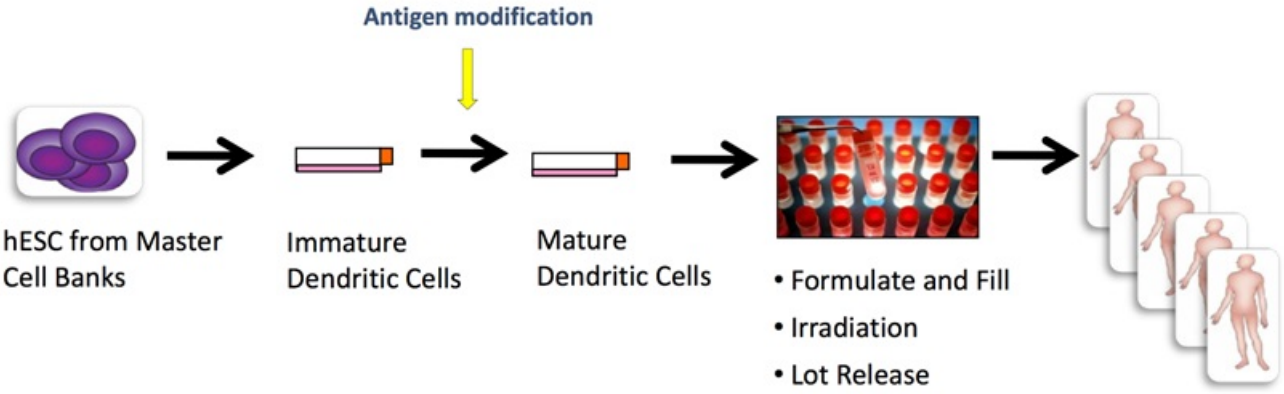
- Dose three pts with two million AST-OPC1 cells
- After 30 days, dose five pts with 10 million AST-OPC1 cells
- After 30 days, dose five pts with 20 million AST-OPC1 cells
- Subject to FDA clearance, expansion of second and third dose cohorts
- May result in pathway to registration study

Potential Vaccine for ≈ 95% Cancer Types

VAC1 is Safe and Stimulates α-Telomerase Immune Responses in 2 Clinical Trials Biomarkers Improved or Stabilized

	Phase 1 Prostate Cancer Duke J. Immunol 2005, 174:3798	Phase 2 Acute Myelogenous Leukemia Multi Center Khoury ASH 2010
# Treated Patients	20	21
Tolerability	Excellent	Excellent
Patients Immunized Against hTERT	95%	55%
Laboratory & Clinical Impact	• Highly Significant Increase in PSA Doubling Times • Clearance of Circulating Immune Complexes	• Significant Increase in 12 Month DFS in High Risk Group (N=11) Compared to Published Historical Controls

The *VAC2* Platform



Mechanism of Action

- Present antigen on restricted HLA
- Participate in indirect antigen presentation
- Adjuvant allogeneic effect

- Hundreds of doses
- Off-the-shelf availability
- Treat a large patient pool

Trial Design

ASTERIAS BIOTHERAPEUTICS

Indication:
Non-small Cell Lung Cancer

- Immune blockade inhibitor trials demonstrate sensitivity of lung cancer to immunotherapy
- Proof of concept for telomerase antigen in lung cancer
- High level of unmet medical need with current therapeutic regime

Objectives:
Safety and preliminary efficacy

- Establish safety of *AST-VAC2* in resected and advanced disease settings
- Assess generation of anti-telomerase and anti-*VAC2* immune responses
- Investigate initial measures of clinical activity

Trial Design:

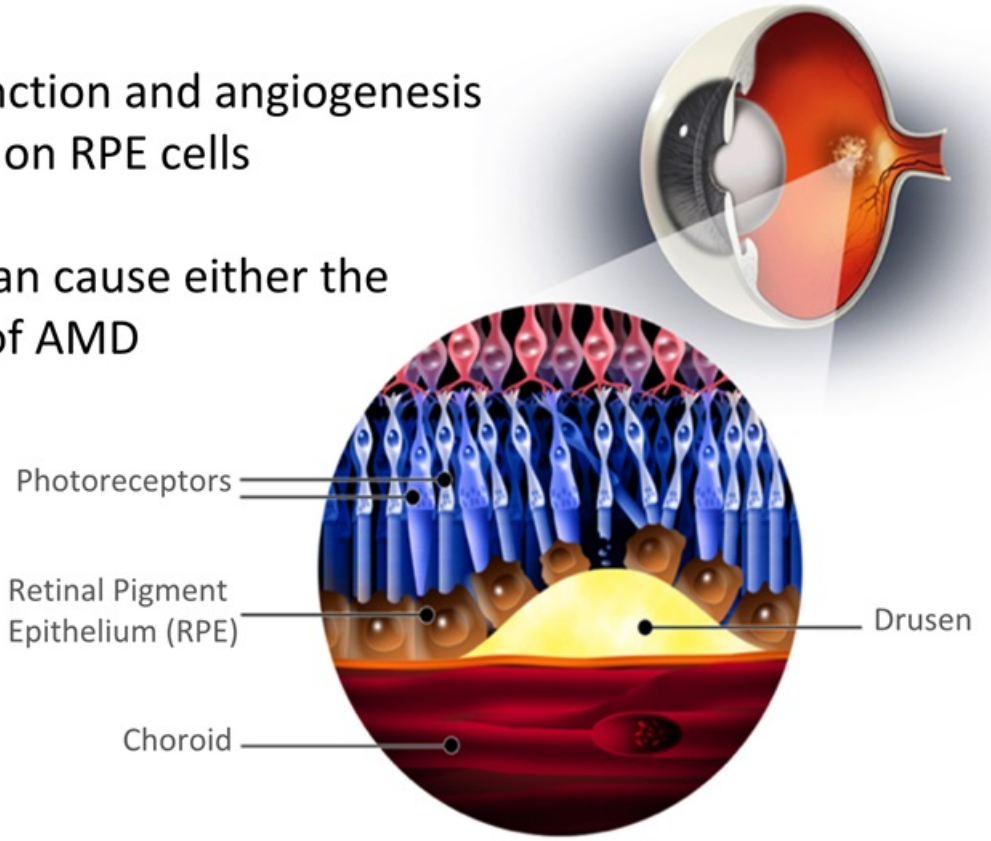
- 5 pts w/ resected NSCLC: 6 vaccinations of 1 million *AST-VAC2* cells
- 12 pts w/ resected NSCLC: 6 vaccinations of 10 million *AST-VAC2* cells
- 12 pts w/ advanced NSCLC: 6 vaccinations of 10 million *AST-VAC2* cells

[1] Source: Cancer Research Technologies, [2] Source: National Institutes of Health. [3] Source: Decision Resources

Age-Related Macular Degeneration (AMD)

CellCure NeuroSciences Ltd.

- Photoreceptor function and angiogenesis inhibition depend on RPE cells
- Loss of RPE cells can cause either the dry or wet forms of AMD



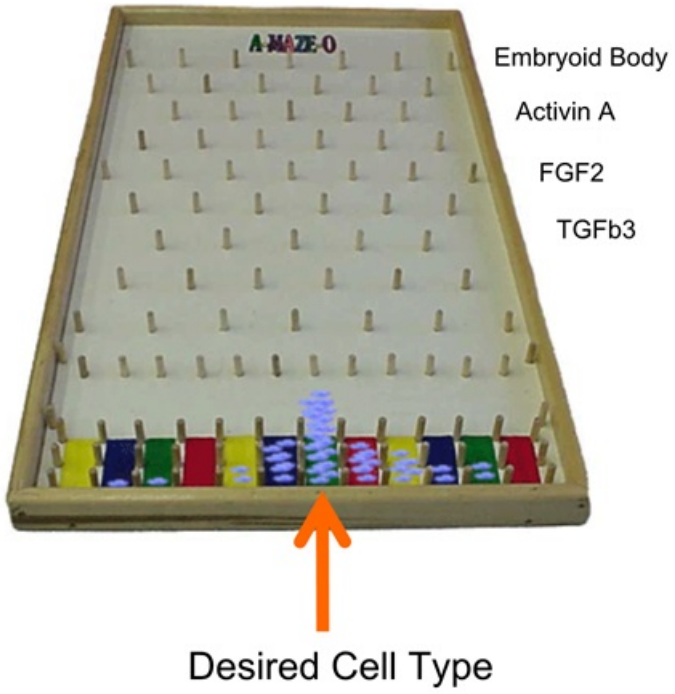
Clinical Trial Design

CellCure NeuroSciences Ltd.

- Phase I/IIa dose escalation safety and efficacy study *of OpRegen* transplanted subretinally in patients with advanced dry-form of AMD (Geographic Atrophy)
- Open label, non-randomized, sequential, single center trial
- Study Site: Hadassah University Medical Center, Jerusalem, Israel
- Dose and Administration: Single injection of 50,000-500,000 cells in saline delivered into the subretinal space.
- *Part 1*
  - Cohort 1: 3 Patients, BCVA 20/200 or less, 50,000 cells
  - Cohort 2: 3 Patients, BCVA 20/200 or less, 200,000 cells
  - Cohort 3: 3 Patients, BCVA 20/200 or less, 500,000 cells
- *Part 2*
  - Cohort 4: 6 Patients, BCVA 20/100, 500,000 cells

The Challenge

- In addition to the challenge of the >1000-fold complexity of cell types coming from ES cells, and the challenge of manufacturing pure and identified product, the highly complex fate decisions lead to a challenge of lot-to-lot variability.



Challenges of Pluripotency

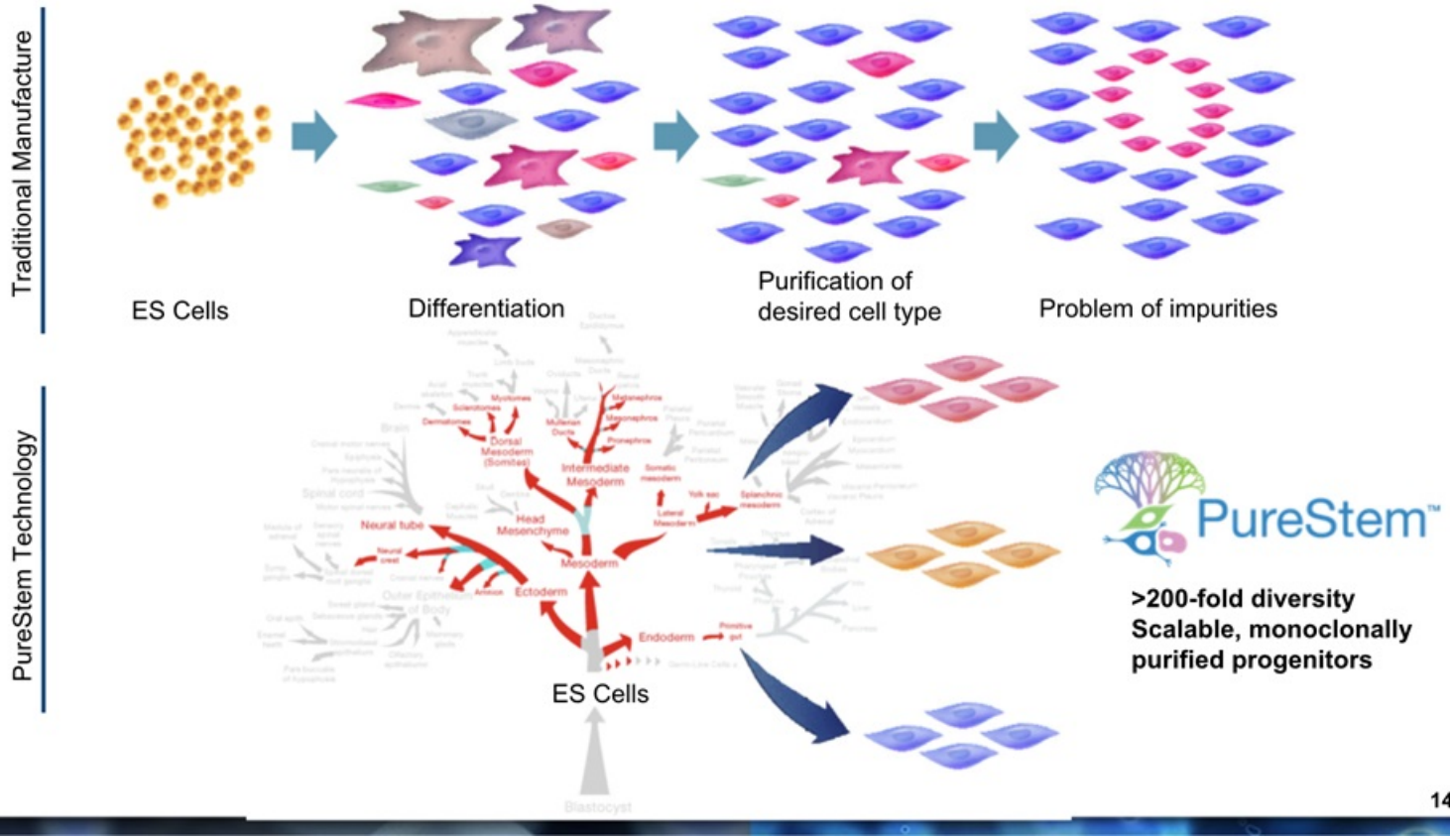
BIOTIME

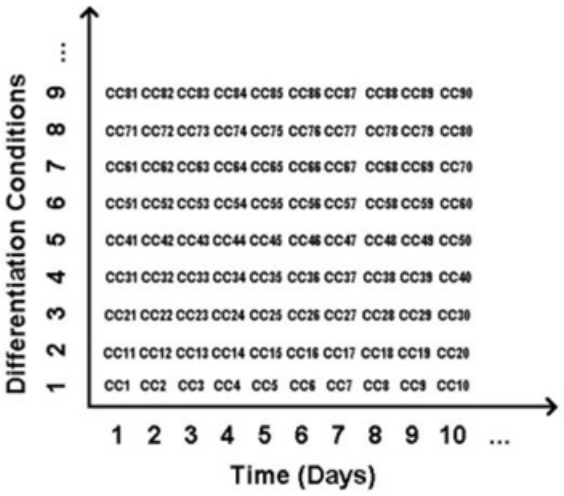
- Scalability
- Reproducibility
- Purity
- Identity

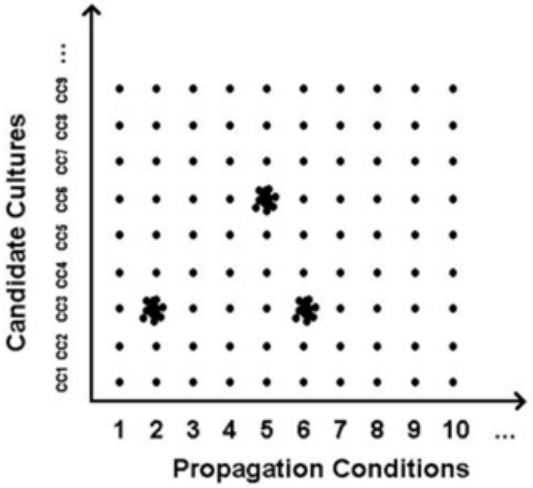
Manufacturing Technology 2.0

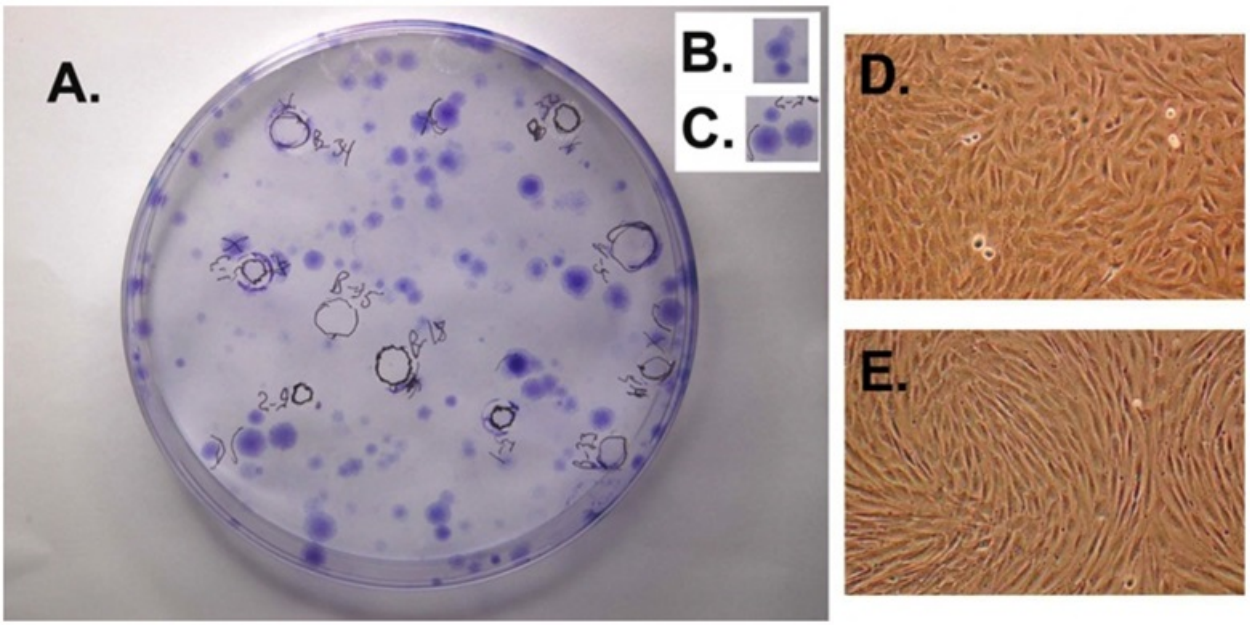
BIOTIME

BioTime's proprietary PureStem manufacturing technology yields >200 highly purified, identified, and scalable human cell types

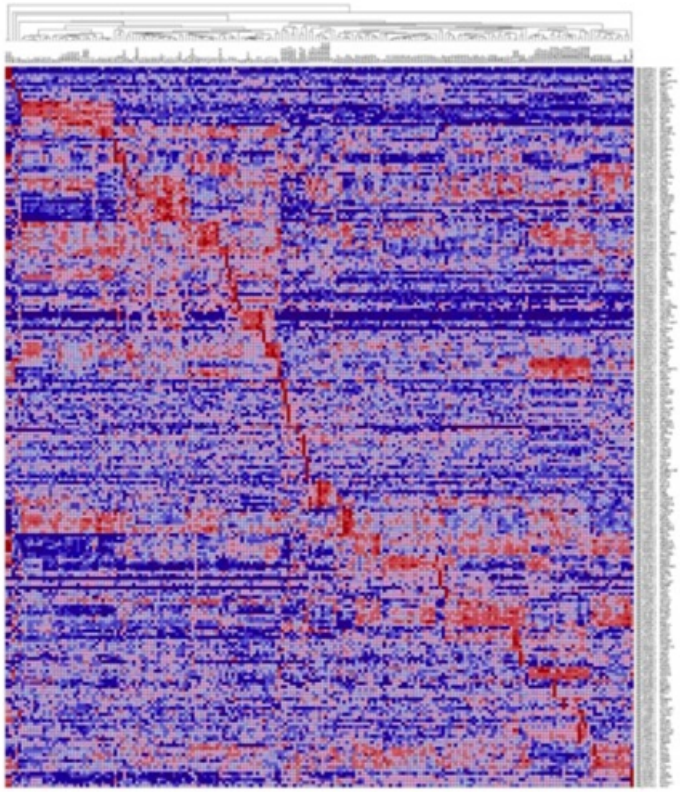



Differentiation Conditions
1 2 3 4 5 6 7 8 9 ...
CC1 CC2 CC3 CC4 CC5 CC6 CC7 CC8 CC9 CC10
CC11 CC12 CC13 CC14 CC15 CC16 CC17 CC18 CC19 CC20
CC21 CC22 CC23 CC24 CC25 CC26 CC27 CC28 CC29 CC30
CC31 CC32 CC33 CC34 CC35 CC36 CC37 CC38 CC39 CC40
CC41 CC42 CC43 CC44 CC45 CC46 CC47 CC48 CC49 CC50
CC51 CC52 CC53 CC54 CC55 CC56 CC57 CC58 CC59 CC60
CC61 CC62 CC63 CC64 CC65 CC66 CC67 CC68 CC69 CC70
CC71 CC72 CC73 CC74 CC75 CC76 CC77 CC78 CC79 CC80
CC81 CC82 CC83 CC84 CC85 CC86 CC87 CC88 CC89 CC90
1 2 3 4 5 6 7 8 9 10 ...
Time (Days)


Candidate Cultures
CC1 CC2 CC3 CC4 CC5 CC6 CC7 CC8 CC9 ...
1 2 3 4 5 6 7 8 9 10 ...
Propagation Conditions


A.
B.
C.
D.
E.

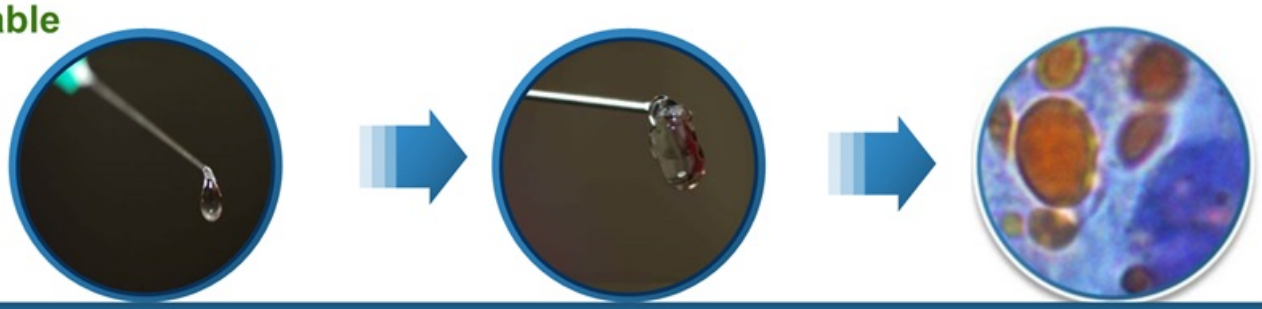
>200 Cell Types Clonally Expandable



HyStem – A Critical Combination

BIOTIME

Injectable

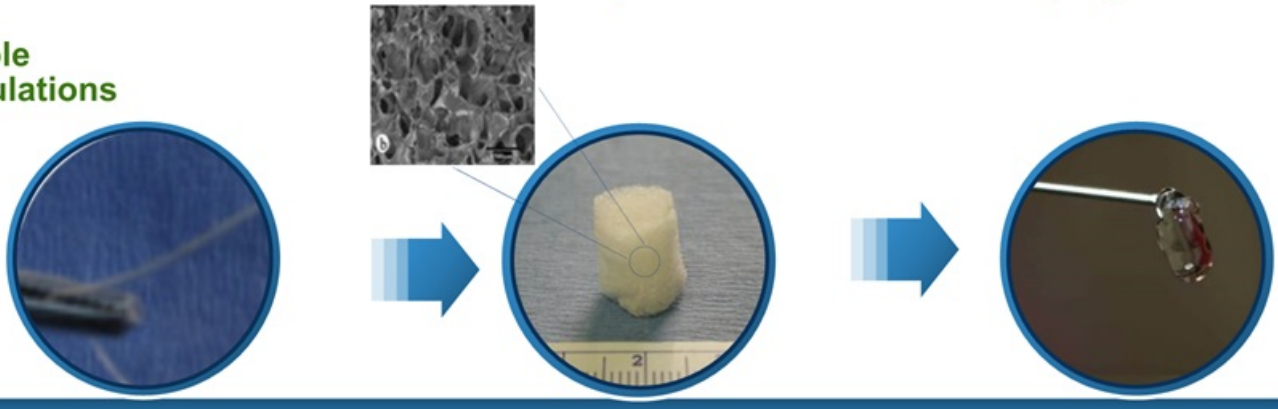


Stays as liquid for ~ 20 minutes

Polymerizes safely *in vivo*

Supports cells including adipocytes in 3-D

Multiple Formulations

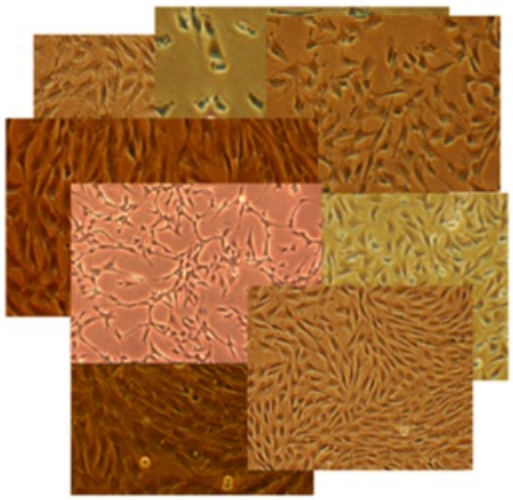


Durable Films

3-D Lattices

Heparin-mediated Slow Release

Fate Space Screening



TGFbs → Chondrogenesis

FGFs → Angiogenesis

BMPs → Osteogenesis

RA → Neurogenesis

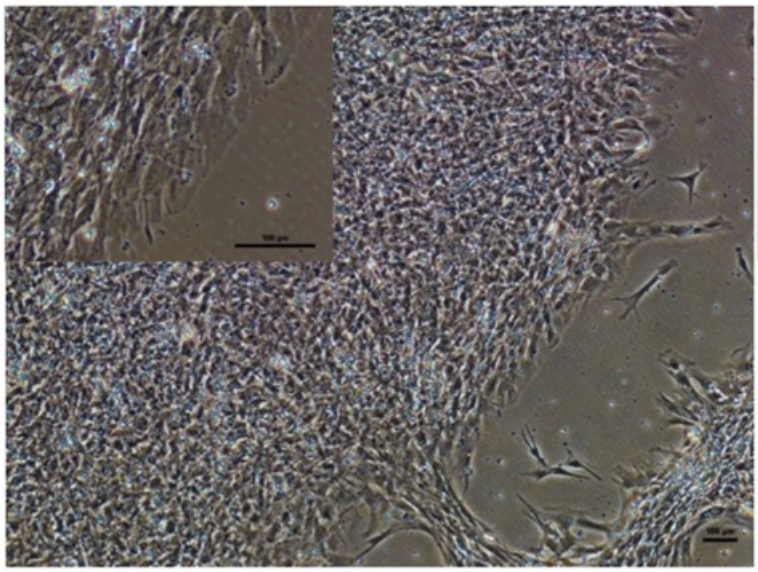
WNTs → Myogenesis

>100 Scalable Clonal hEP Lines	Array of Diverse Differentiation Conditions	Approx 4,000 Gene Expression Microarrays

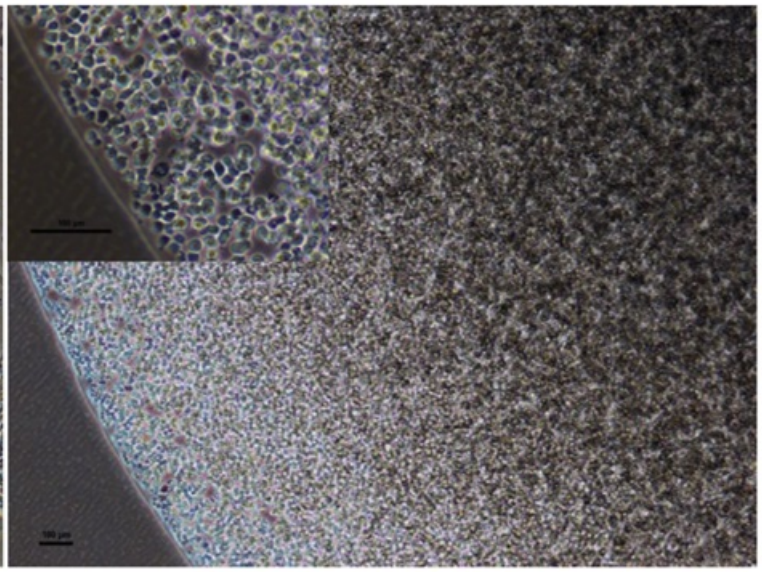
Fate Space Screening

BIOTIME

T42 in MM Culture

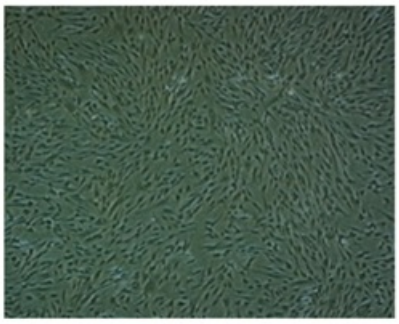


T42 in HyStem Culture

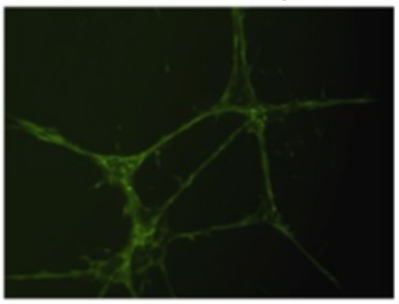


Purified Endothelium

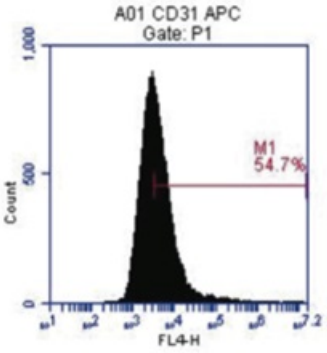
Monoclonal Endothelium



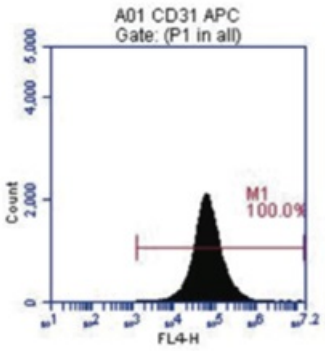
GFP Endothelium (168 hrs)



Heterogeneous



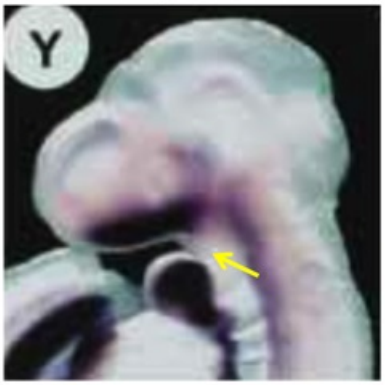
Monoclonal



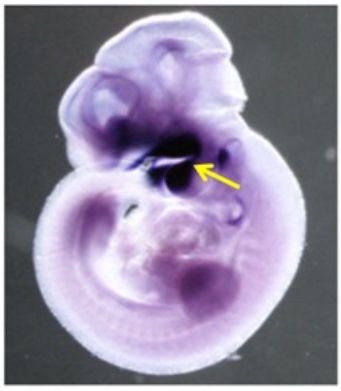
Precise Identity

BIOTIME

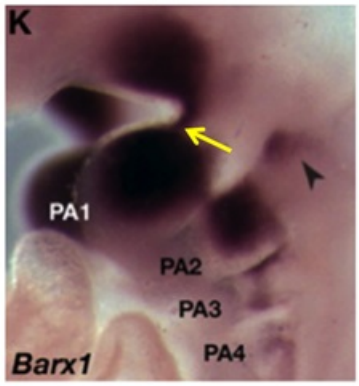
Foxf1

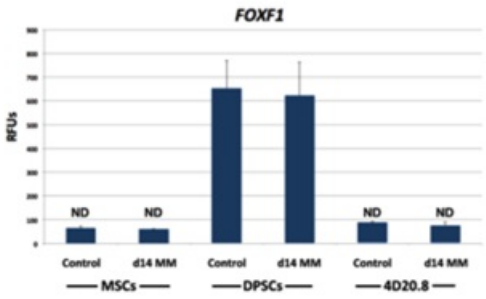


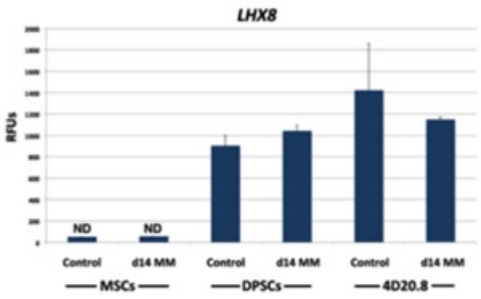
Lhx8

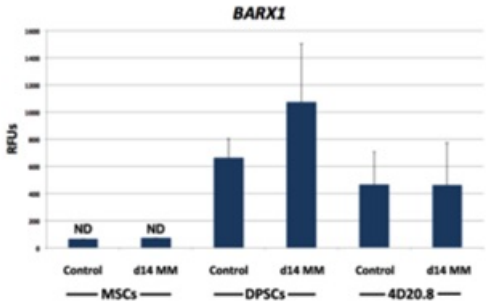


Barx1









Foxf1 Genes & Dev. 18: 937-951
Lhx8 Science 24:306: 2255-2257
Barx1 Development 136: 637-645

Scalability

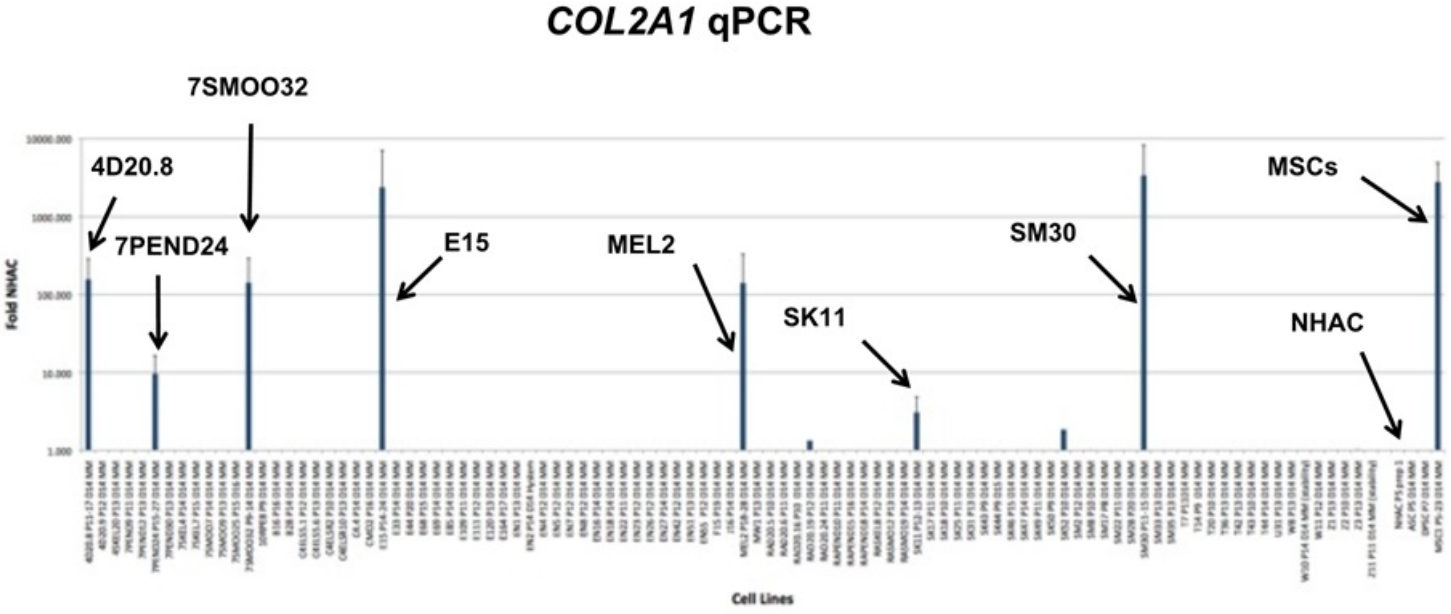
BIOTIME

Estimated Cell Number If Scaled Cells Presently in Inventory to Passage 30

CELL LINE

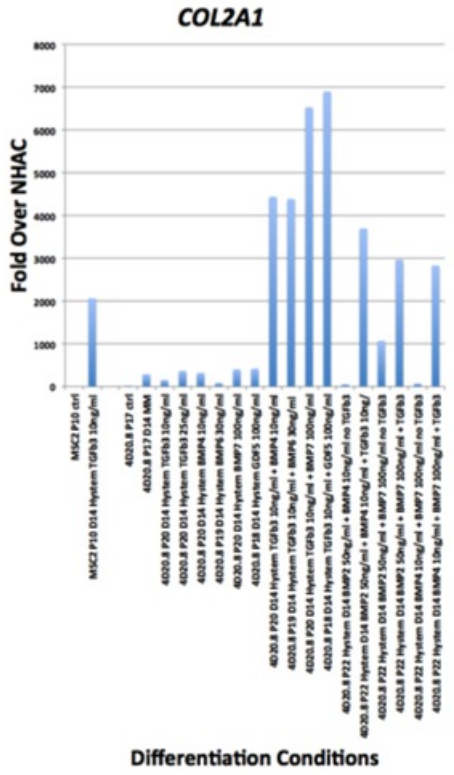
4D20.8 Example	Cell Number in Millions	Passage Number	Approximate treatments if require 100 million cells per treatment
	100	P9	1
	300	P10	3
	900	P11	9
	2700	P12	27
	8100	P13	81
	24300	P14	243
	72900	P15	729
	218700	P16	2187
	656100	P17	6561
	1968300	P18	19683
	5904900	P19	59049
	17714700	P20	177147
	53144100	P21	531441
	159432300	P22	1594323
	478296900	P23	4782969
	1434890700	P24	14348907
	4304672100	P25	43046721
	12914016300	P26	129140163
	38742048900	P27	387420489
	1.16226E+11	P28	1162261467
	3.48678E+11	P29	3486784401
	1.04604E+12	P30	10460353203

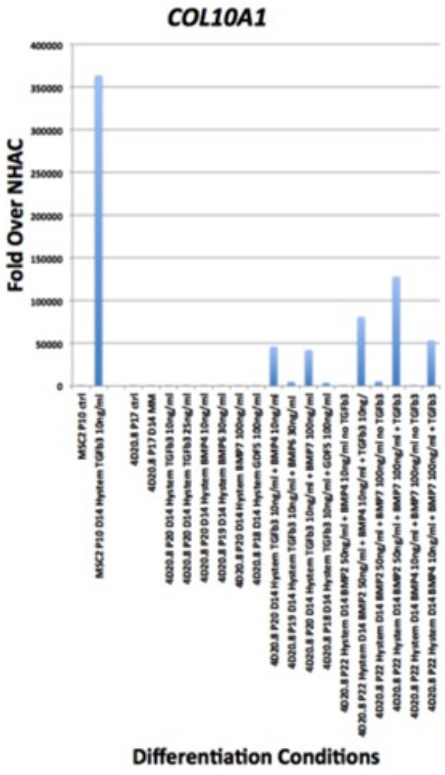
Micromass with TGFb3 Condition



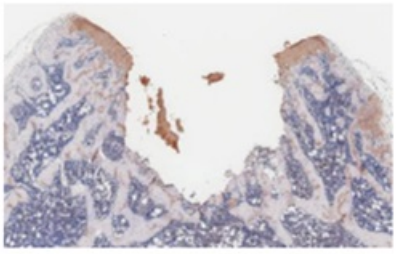
Osteochondral Differentiation

PureStem progenitor lines targeting orthopedics

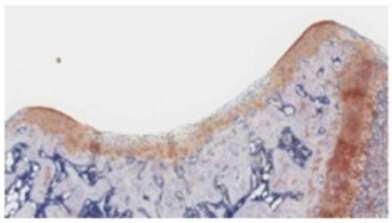




Experimentally-induced trauma

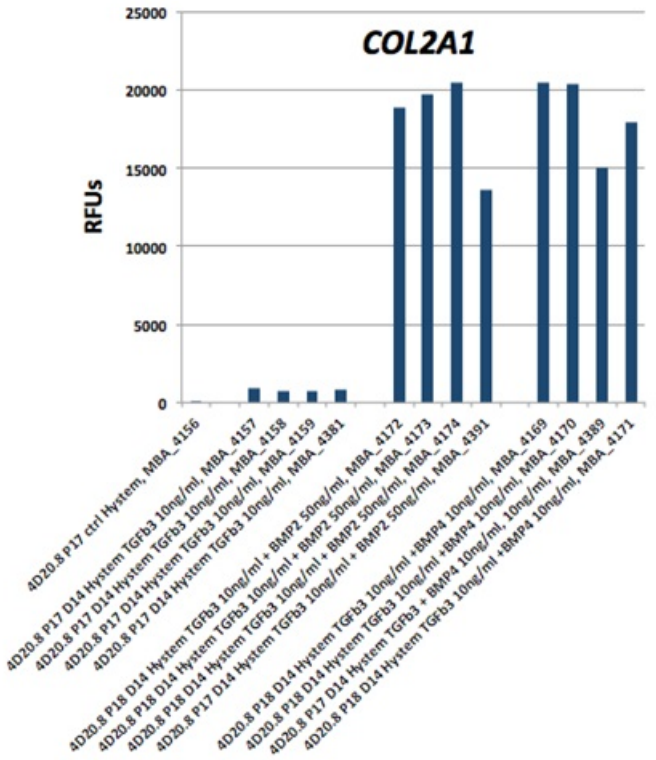


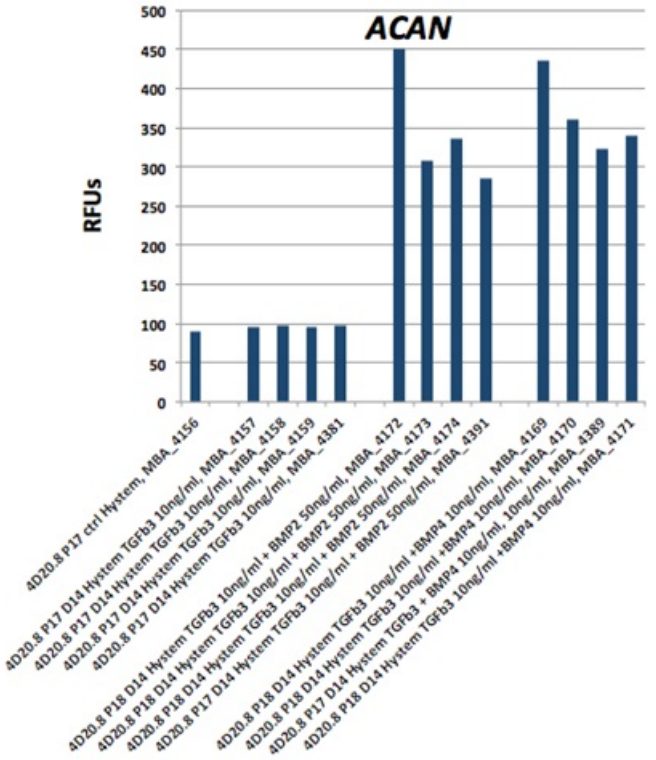
OTX-CP03



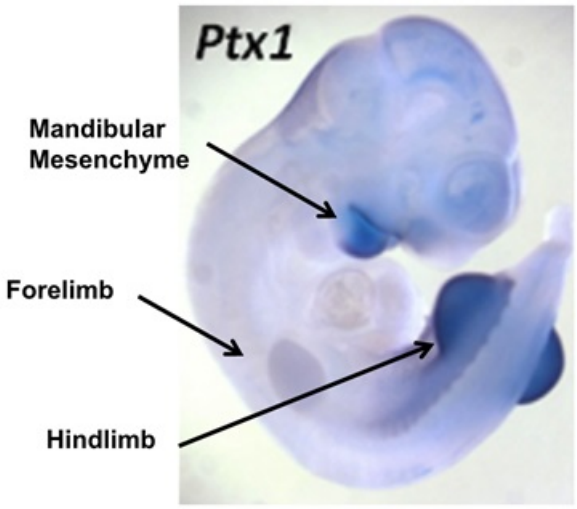
4 weeks

Reproducibility

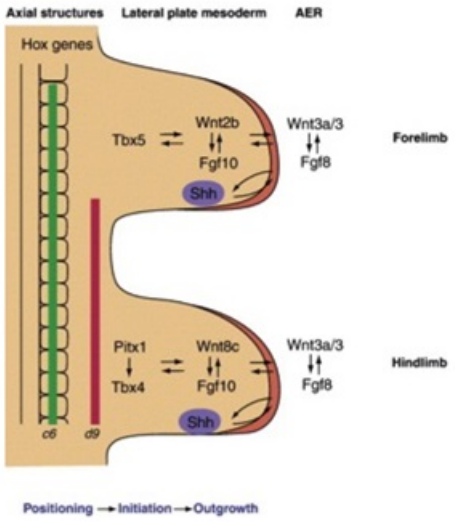




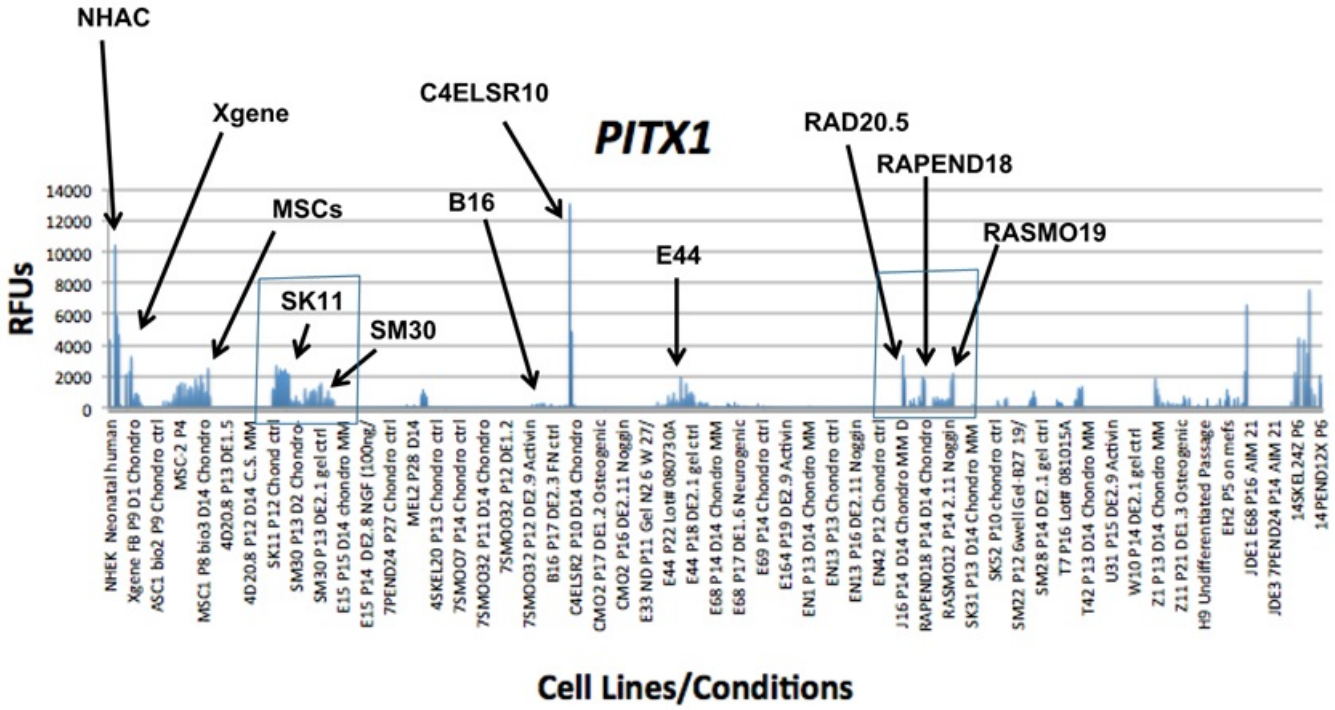
Distal LPM displays unique molecular markers



Taher L, Collette NM, Murugesh D, Maxwell E, Ovcharenko I, et al. (2011) Global Gene Expression Analysis of Murine Limb Development. PLoS ONE 6(12): e28358. doi:10.1371/journal.pone.0028358



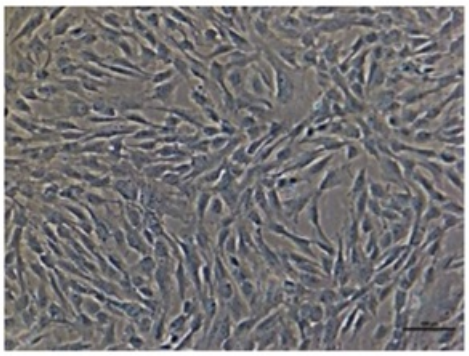
Limb Bud Markers



Precise Neural Crest Cell Types

BIOTIME

E69



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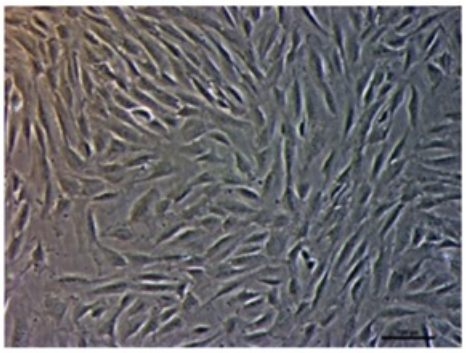
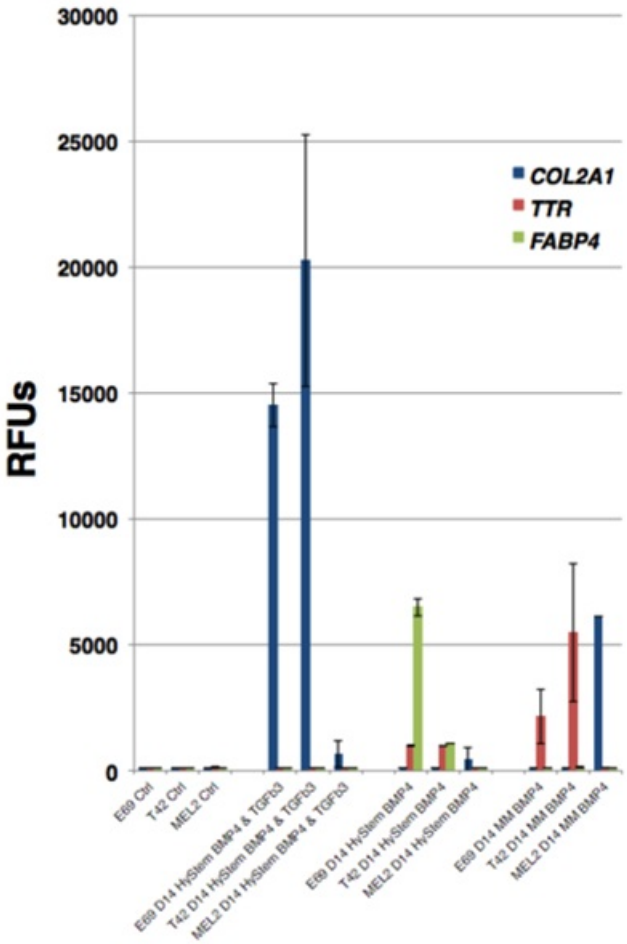
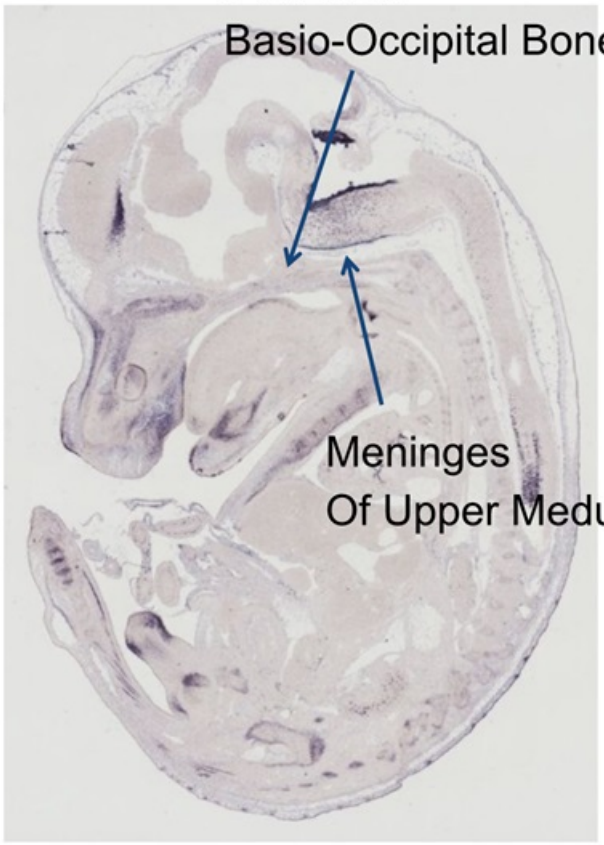




Precise Neural Crest Cell Types

BIOTIME

CYP26B1



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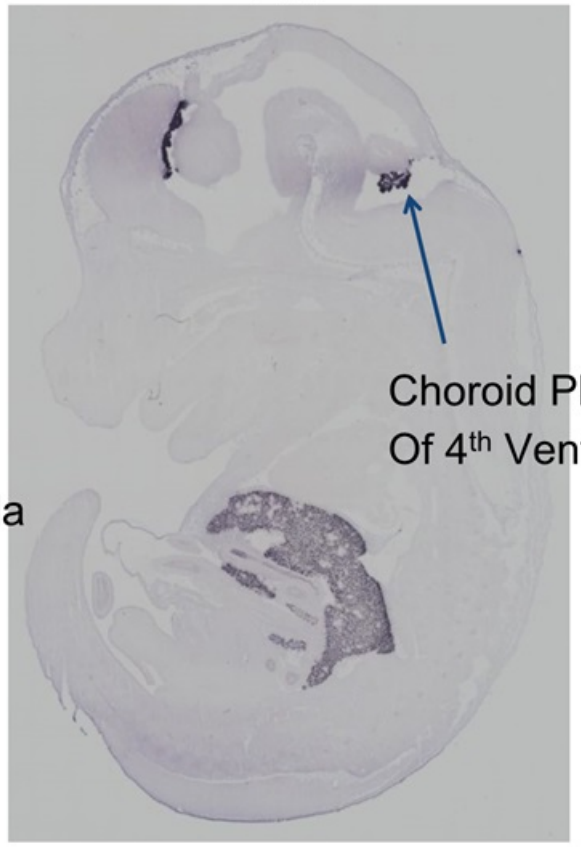
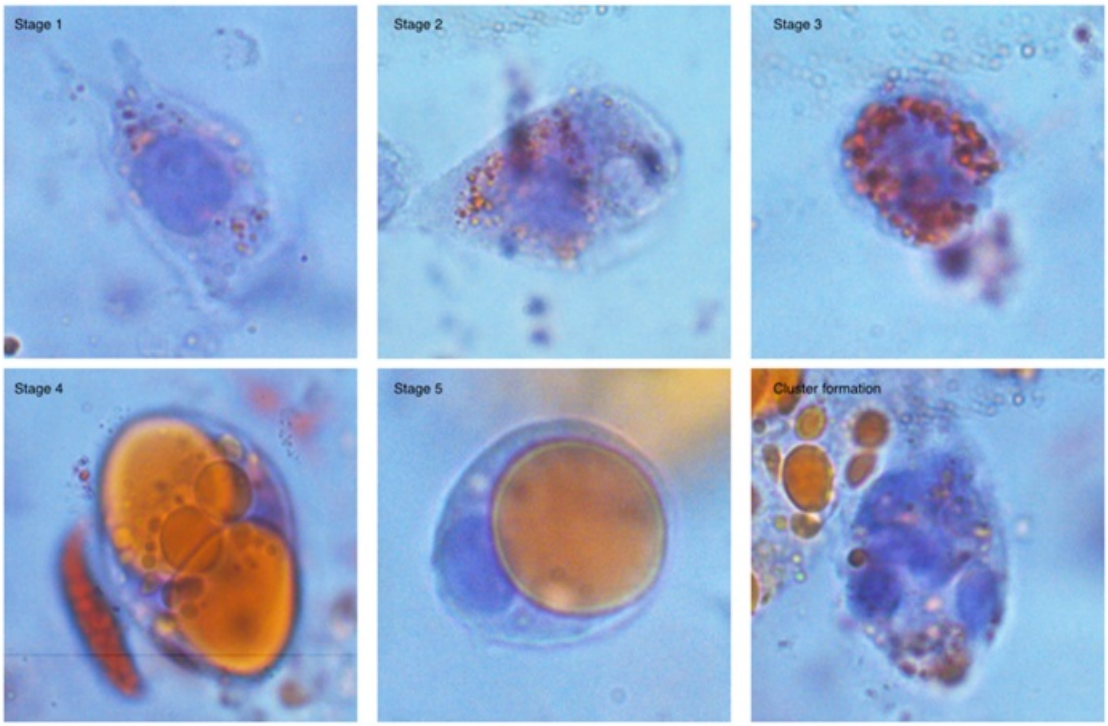


In situ images from Genepaint.org

Adipogenesis in *Renevia*



HyStem Trial - *Renevia*™

- *Renevia*™ is an injectable matrix designed to safely produce 3-D tissue *in vivo,* keeping cells where the surgeon places them. It is expected to have numerous applications in multiple tissue types
- Pivotal trial for CE mark for use in HIV-associated lipoatrophy in combination with autologous lipotransfer now underway
- Estimated 3.5M people worldwide have HIV-related lipoatrophy
- In addition, a greater number of people have lipoatrophy due to trauma or aging
- Many other potential applications in combination with adult and ESC therapies

Age-Related Lipoatrophy

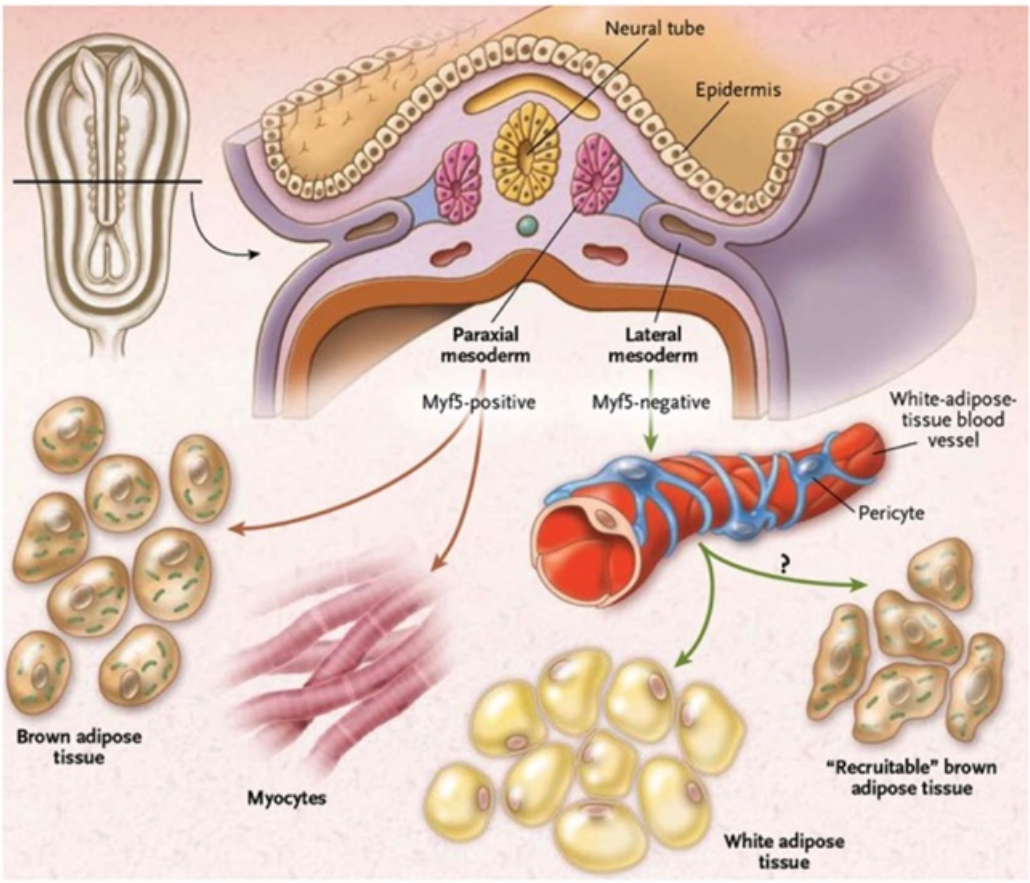
Renevia™ Pivotal Trial

BIOTIME

Trial Design

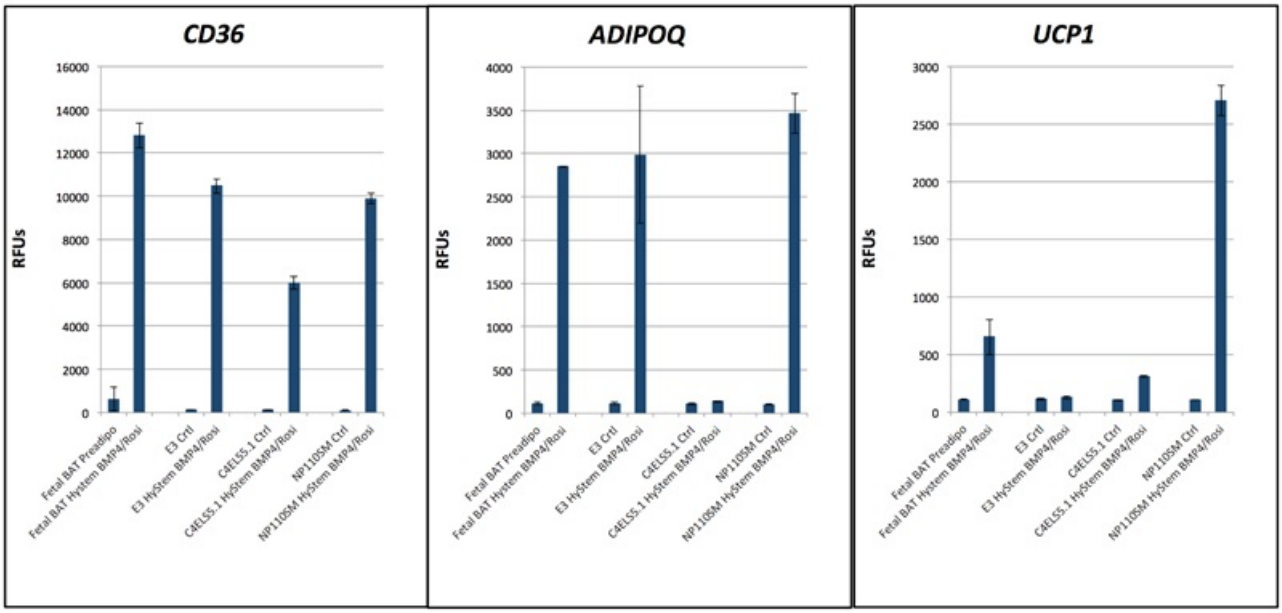
Multicenter, randomized, controlled, single blind trial	
Treated vs. delayed treatment control	25 - 92 subjects in each group with treatment effect measured at 1, 3, and 6 months
Primary Endpoint	Increase in skin thickness as measured by ultrasound at 6 months
Secondary Endpoint	Mid-face volume deficit score Global aesthetic improvement score
Sites	2 sites in Palma de Mallorca, Spain

Diversity of Adipocyte Progenitors



N Engl J Med 2009 360;19

Brown Adipocyte Progenitors



Advantages of HyStem & Clonal EPs

- Rare and potentially valuable cell types
- Scalable & reproducible product
- Purity and identity of cells
- A formulation optimizing viability & immobilization of engraftment