#### FORM 5

Check this box if no longer subject to

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

**OWNERSHIP** 

ashington,	D.C.	20549	

	OMB APPROVAL										
	OMB Number:	3235-0362									
- 1	1										

Estimated average burden hours per response: 1.0

# Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

Form 3 Holdings Reported.

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Form 4	4 Transactions	Reported.	Fil	ed pursuant t or Section					urities Excha Company Ad									
1. Name and Address of Reporting Person* SEGALL JUDITH				2. Issuer Name <b>and</b> Ticker or Trading Symbol BIOTIME INC [ BTX ]							Relationship of Reporting Person(s) to Issuer (Check all applicable)      Norestar 10% Owner							
(Last) (First) (Middle) 935 PARDEE STREET					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2004						/ear)	X Director 10% Owner  X Officer (give title below) below)  VP;Member, Office of President						
(Street) BERKELEY CA 94710				4. If Ame	4. If Amendment, Date of Original Filed (Month/Day/Year)					6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person								
(City)	(5)		(Zip)	vative Sec	ruriti		cauire	d D	need	of or l	Renefi	riall	v Owne	<b>d</b>				
Table I - Non-Deriv  1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)			2A. Deeme	2A. Deemed Execution Date, if any		3. Transaction Code (Instr.		4. Securities Acquir Of (D) (Instr. 3, 4 and		uired (A) or Dispos		5. Amour Securitie Beneficia	nt of s ally	6. Ownership Form: Direc	: Direct	Indire Bene	neficial	
			(WOITTI/Day	// rear)	8)	8)		ount	(A) or (D)	Price		Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		(D) or Indirect (I) (Instr. 4)		Ownership (Instr. 4)		
Common	nmon Shares, no par value								54		,169 <sup>(1)</sup>		D					
		Т	able II - Deriva e.g., r	itive Secu outs, calls									Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)  3. Transaction Execution Date, if any (Month/Day/Year)  3. Transaction Date Execution Date, if any (Month/Day/Year)  3. Transaction Date Exercisable and Expiration Date (Month/Day/Year)		ate	7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)				Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		Beneficial Ownership t (Instr. 4)					
					(A)	(D)	Date Exercis	able	Expiration Date	Title	Amou or Numb of Share	er						
Option to Purchase Common Shares	\$4						10/28/2	002	10/27/2007	Commo Shares		56		26,666		D		
Option to Purchase Common Shares	\$4						01/01/2	003	10/27/2007	Commo Shares		57		26,66	.67 D		D	
Option to Purchase Common Shares	\$4						01/04/2	004	10/27/2007	Commo Shares	n 26,60	57		26,66	57	D		
Warrants to Purchase Common Shares	\$2						01/21/2	004	01/14/2007	Commo Shares		37		21,58	37	D		
Option to Purchase	\$2						(2)		05/31/2009	Commo	n 50,00			50,00	00	D		

### **Explanation of Responses:**

- 1. Includes 130,000 shares that may be acquired upon the exercise of certain stock options, and 21,587 shares that may be acquired upon 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.

## Remarks:

/s/ Judith Segall

02/14/2005

\*\* Signature of Reporting Person

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.