BIOTIME INC Form 4 July 05, 2017

FORM 4

OMB APPROVAL

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287

Check this box if no longer subject to Section 16. Form 4 or

Expires: January 31, 2005

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

Form 4 or Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

the Instruction $\frac{30(1)}{100}$ of the investment construction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * SCHLACHET DAVID			2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer			
(Last) 1010 ATLA 102	(First) (N	Middle)		•	_		(Che _X_ Director Officer (gives)		e) % Owner er (specify	
ALAMEDA	(Street)			ndment, Dat h/Day/Year)	e Original		6. Individual or Applicable Line) _X_ Form filed by Form filed by Person	One Reporting Po	erson	
(City)	(State)	(Zip)	Table	I - Non-Do	erivative S	ecurities Ac	quired, Disposed o	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any	med on Date, if Day/Year)	3. Transactic Code (Instr. 8)	4. Securit onAcquired Disposed (Instr. 3,	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Shares, no par value							32,050	I	see footnote (1)	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474

(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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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)	Code	TransactionDerivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) ((D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option to Purchase Common Shares	\$ 3.15	07/01/2017		A	20,000		<u>(2)</u>	06/30/2022	Common Shares	20,000
Option to Purchase Common Shares	\$ 2.72						(3)	06/30/2021	Common Shares	20,000
Option to Purchase Common Shares	\$ 3.57						<u>(4)</u>	06/30/2020	Common Shares	20,000
Option to Purchase Common Shares	\$ 3.11						<u>(5)</u>	06/30/2019	Common Shares	20,000
Option to Purchase Common Shares	\$ 2.86						<u>(6)</u>	04/10/2019	Common Shares	20,000

Reporting Owners

Reporting Owner Name / Address	Relationships					
1	Director	10% Owner	Officer	Other		
SCHLACHET DAVID 1010 ATLANTIC AVENUE SUITE 102 ALAMEDA, CA 94501	X					
Signatures						

Signatures

/s/David Schlachet	07/05/2017	
**Signature of	Date	

Reporting Owners 2

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Explanation of Responses:

- * 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).
- (1) All shares are owned by Schlachet Management Ltd., a privately held company of which Mr. Schlachet is the sole shareholder, chief executive officer, and director.
- (2) Will become exercisable in four equal quarterly installments after the date of grant on July 1, 2017 based upon continued service on the board of directors.
- (3) Became exercisable in four equal quarterly installments after the date of grant on July 1, 2016.
- (4) Became exercisable in four equal quarterly installments after the date of grant on July 1, 2015.
- (5) Became exercisable in four equal quarterly installments after the date of grant on July 1, 2014.
- (6) Became exercisable in four equal quarterly installments after the date of grant on April 11, 2014.

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 currently valid OMB number.