BIOTIME IN	NC								
Form 5									
February 14,	, 2014								
FORM	15					OMB AF	PPROVAL		
	COMMISSION	OMB Number:	3235-0362						
	Check this box if Washington, D.C. 20549					Expires:	January 31,		
no longer to Section	16						2005		
	Form 4 or Form ANNUAL STATEMENT OF CHANGES IN BENEFIC					Estimated a burden hou			
5 obligatio may conti		OWNE	KSHIP OF (	SECURITIES		response 1.0			
See Instru 1(b).	ction Filed pur	suant to Section	16(a) of the $S$	Securities Exchang	e Act of 1934				
Form 3 He	-			ig Company Act of		L			
Reported Form 4				ompany Act of 194					
Transactio	ons								
Reported									
1. Name and Address of Reporting Person 2. Issuer Name and Ticker or Trading 5. Relationship o						Reporting Person(s) to			
	LT CORP /NY	Symbol		C C	Issuer				
		BIOTI	ME INC [B7	[X]					
(Last)	(First) (N	Middle) 3. State	nent for Issuer's	(Check all applicable)					
			Day/Year)		Director	X 10%			
150 5 575		12/31/	2013		Officer (give titleOther (specify below) below)				
150 E. 57TI	HSTREET								
	(Street)		endment, Date	Original	6. Individual or Joint/Group Reporting (check applicable line)				
		Filed(M	onth/Day/Year)						
					(eneck	appricable fine)			
NEW YOR	K, NY 10022								
_X_ For					•	X_ Form Filed by One Reporting Person Form Filed by More than One Reporting			
					Person				
(City)	(State)	(Zip) Ta	ole I - Non-Der	ivative Securities Acq	uired, Disposed of,	or Beneficial	ly Owned		
1.Title of	2. Transaction Date	e 2A. Deemed	3.	4. Securities Acquire	d 5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Execution Date, if		(A) or Disposed of	Securities	Form: Direct	Indirect		
(Instr. 3)		any (Month/Day/Year	Code (Instr. 8)	(D) (Instr. 3, 4 and 5)	•	(D) or Indirect (I)	Beneficial Ownership		
		(Within Day Tear	(11150.0)	(1150.5, 4  and  5)		(Instr. 4)	(Justa 4)		

(City)	(State) (	Zip) Tabl	e I - Non-Deri	ivative Securities Acqu	ired, Disposed of	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price	Securities Beneficially Owned at end of Issuer's Fiscal Year (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	01/01/2013(1)	Â	G	55,100 D \$ <u>(1)</u>	1,627,405	D	Â

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

Persons who respond to the collection of information<br/>contained in this form are not required to respond unless<br/>the form displays a currently valid OMB control number.SEC 2270<br/>(9-02)

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

## Edgar Filing: BIOTIME INC - Form 5

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. O B O E I S G E I S (I
				(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships					
1.0	Director	10% Owner	Officer	Other		
GREENBELT CORP /NY 150 E. 57TH STREET NEW YORK, NY 10022	Â	ÂX	Â	Â		
Signatures						
/s/ Alfred D. Kingsley, President	02/14/2014					

\*\*Signature of Reporting Person

Date

## **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) During 2013, Greenbelt Corp. gifted a total of 55,100 common shares to charitable organizations.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.