FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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| | OMB Number: | 3235-0287 |
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| l | hours per response: | 0.5 |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* SCHWARTZ JOHN J | | | | | 2. Issuer Name and Ticker or Trading Symbol STEMCELLS INC [stem] | | | | | | | | | ck all appli Directo | cable) or | g Per | son(s) to Iss | vner | |
|--|--|--|--|---------|--|--|-------|-----------------|--|-----|------------------|-----------------|---|--|---|---|---|--------------------|------------------------------------|
| (Last) (First) (Middle) C/O STEMCELLS, INC. | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/31/2003 | | | | | | | | | | Officer below) | (give title | | Other (s below) | specify |
| 3155 PORTER DRIVE | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) PALO ALTO CA 94304 | | | | | | | | | | | | | 1 ′ | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | Execution Date, | | | Code (Instr. 5) | | | | | ties For cially (D) Following (I) | | n: Direct r Indirect istr. 4) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | | Code | v | Amount | (A) (D) |) or) Price | | Reported Transact (Instr. 3 | ction(s) | | | (Instr. 4) |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Day | Date, 1 | 4. Transactic Code (Inst | | | | 6. Date Exercisa Expiration Date (Month/Day/Year | | Amount of | | of s ng e Security | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | Owners Form: Iy Direct (or Indir (I) (Inst | Ownership | Beneficial Ownership ct (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisabl | | xpiration ate | Title | or | ount nber res | | | | | |
| Stock Option (right to buy) | \$0.25 | 12/31/2003 | | | A ⁽¹⁾ | | 6,503 | | 12/31/200 | 3 1 | 2/31/2013 | Common Stock | 6,5 | 503 | \$0 ⁽¹⁾ | 6,503 | | D | |

Explanation of Responses:

1. Compensation for service on the Board of Directors and for attendance at Board meetings. Non-employee directors receive compensation in the form of options to purchase shares of the Company's common stock at below market prices (\$0.25 per share), in lieu of cash payments of \$4,500 quarterly, \$1,500 per Board meeting attended in person or videoconference, and \$500 for a Board meeting attended by telephone or for a Committee meeting not coincident with a Board meeting. The number of shares is calculated using the closing price of the Company's common stock for the last business day of the quarter, less the option price of \$0.25 per share. Options so issued vest immediately.

Remarks:

John J. Schwartz by Iris Brest,

** Signature of Reporting Person

Attorney-in-Fact

12/31/2003 Date

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.