FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPRO | DVAL | | | | | |
|---|------------------------|-----------|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | |
| l | Estimated average burd | len | | | | | |
| | 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* MCGLYNN MARTIN M | | | | | | 2. Issuer Name and Ticker or Trading Symbol STEMCELLS INC [STEM] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
|---|--|------|----------|---------|---|--|---|---------------------------------|--|-----|--------------------|---|-------------|-----------|---|--|---|---|--|--|--|
| MCGL | | | | | | | | | | | | X Dire | | tor 10% O | | % Owner | | | | | |
| (Last) (First) (Middle) | | | | | | Date of Earliest Transaction (Month/Day/Year) | | | | | | | | _ | X Office below | | | | her (specify low) | ' | |
| C/O STEMCELLS, INC. | | | | | | | 03/10/2008 | | | | | | | | | President & CEO | | | | | |
| 3155 PORTER DRIVE | | | | | | | | | | | | | | | | | | | | | |
| | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | |
| (Street) | | | | | | | | | | | | | | | | Line) X Form filed by One Reporting Person | | | | | |
| PALO AI | PALO ALTO CA 94304 | | | | | | | | | | | | | | Form filed by More than One Reporting | | | | | | |
| (City) | City) (State) (Zip) | | | | | | | | | | | | | | | Person | | | | | |
| (Oity) | (0.0 | | | | | | | | | | | | | | | _ | _ | | | | |
| | | Tabl | e I - No | n-Deriv | ative | Sec | curitie | s Acc | quired, | Dis | posed o | f, or | Ben | eficia | ally (| Owne | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Date | | | | | | Executio | | | | | | ties Acquired (A) I Of (D) (Instr. 3, 4 | | | 4 and 5) Se | | ount of ities icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | of Indire ect Benefic Owners | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | | v | Amount | () | A) or O) | Price | | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) | (instr. 4) | |
| Common Stock 03/10 | | | | | | /2008 | | | | | 412,50 | 00 A \$0 | | \$0.0 | 00 ⁽¹⁾ 438,94 | | 8,940(2) | D | | | |
| | 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) | of 2. 3. Transaction Date Execution Date, or Exercise (Month/Day/Year) | | | n Date, | 4. Transaction Code (Instr. 8) | | 5. Nu of Deriv Secun Acqu (A) or Dispo of (D) (Instr and 5 | ative rities ired osed | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. : and 4) | | | 8. Price of Derivative Security (Instr. 5) | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | hip of Indire Benefic O) Owners ect (Instr. 4 | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | | | | | Expiration Date | Title Sha | | | | | | | | | |

Explanation of Responses:

- 1. Restricted stock units, with 1/3 vesting on each of the three anniversaries following the grant.
- $2. \ Includes \ shares \ held \ in \ 401(k) \ account, \ in \ accordance \ with \ issuer's \ employer-match \ policies.$

Remarks:

Martin M. McGlynn

03/12/2008

** Signature of Reporting Person

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.