Edgar Filing: AMEDICA Corp - Form 4

Form 4												
January 13, 20									0145.4			
FORM	4 UNITED	STATES					NGE	COMMISSION		PPROVA 3235-		
Check this	box		Wa	ashington	, D.C. 20	549			Number:			
if no longe		IENT OI	СЦАВ	NCESIN	DENIEE			WNEDSHID OF	Expires:	Janua	2005	
subject to Section 16 Form 4 or Form 5	subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Section 16. SECURITIES Form 4 or								Estimated burden hot	Estimated average burden hours per response		
obligation: may contin <i>See</i> Instruct 1(b).	s Section 17(a) of the I	Public U		ding Cor	npany	Act	nge Act of 1934, of 1935 or Sectio 940	on			
(Print or Type Ro	esponses)											
1. Name and Ad Whitfield Ch	2. Issuer Name and Ticker or Trading Symbol AMEDICA Corp [AMDA]				ıg	5. Relationship of Reporting Person(s) to Issuer						
(1 +)	(First) (1	Middle)			-	v]		(Check all applicable)				
(Last) C/O AMEDI CORPORAT SOUTH	3. Date of Earliest Transaction (Month/Day/Year) 01/08/2015					Director 10% Owner X Officer (give title Other (specify below) below) below) Chief Commercial Officer						
	(Street)		4. If Am	endment, Da	ate Origina	1		6. Individual or Joint/Group Filing(Check				
· · · · · ·				Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)	Tab	ole I - Non-I	Derivative	Securi	ties A	cquired, Disposed o	of, or Beneficia	lly Owne	d	
	2. Transaction Date Month/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8)	Disposed (Instr. 3, 4	(A) or of (D))	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature Indirect Beneficia Ownersh (Instr. 4)	al ip	
				Code V	Amount	(D)	Price	(instr. 5 and 1)				
Reminder: Repo	ort on a separate line	for each cla	ass of sec	urities benef	ficially own	ned dire	ectly o	or indirectly.				
					inforn requir	nation ed to ys a c	conta respo	pond to the colle ained in this form and unless the for atly valid OMB co	i are not rm	SEC 1474 (9-02)		
	Tab			curities Acq ls, warrants				Beneficially Owned ecurities)	I			

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Ame
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative Securities	Expiration Date	Underlying Secu

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Security (Instr. 3)	or Exercise Price of Derivative		any (Month/Day/Year)	Code (Instr. 8)	Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		(Month/Day/Year)		(Instr. 3 and 4)	
	Security		Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Ai Ni Sh	
Stock Option	\$ 2.95	01/08/2015		D <u>(1)</u>		100,000	02/13/2015	08/13/2024	Common Stock	1
Stock Option	\$ 0.95	01/08/2015		A <u>(1)</u>	100,000		02/13/2015	08/13/2024	Common Stock	1

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Whitfield Christopher C/O AMEDICA CORPORATION 1885 WEST 2100 SOUTH SALT LAKE CITY, UT 84119			Chief Commercial Officer				
Signatures							
/s/ Kevin Ontiveros, by Power of Attorney		01/13/201:	5				

<u>**</u>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).

The reporting person agreed to an amendment of his outstanding stock option, as reflected in this Form 4, for 100,000 shares of the Company's common stock granted to the reporting person on August 13, 2014 (the "August 2014 Option") changing the exercise price

(1) from \$2.95 per share to an exercise prices of \$.95 per share. The option continues to vest over a three year period at 16.67% every six months as long as the reporting person is employed by the Company on each vesting date and shall be accelerated as per the terms of the Retention Agreement.

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.