

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

OMB APPROVAL
OMB Number: 3235-0076
Expires: August 31, 2015
Estimated Average burden hours per response: 4.0

	vv asningt	on, D.C.	per response: 4.0	
1 leguaria Identity				
1. Issuer's Identity		E	To the Th	
CIK (Filer ID Number)	Previous Name(s)		Entity Type	
0001269026	AMEDICA CO	DRP	• Corporation	
Name of Issuer			C Limited Partnership	
AMEDICA Corp			C Limited Liability Company	у
Jurisdiction of Incorporation/Organization			General Partnership	
DELAWARE			C Business Trust	
Year of Incorporation/Organi	 zation		C Other	
 Over Five Years Ago 			Other	
C Within Last Five Years (Specify Year)				
Yet to Be Formed				
				_
2. Principal Place of	Business and	l Contact Info	ormation	
Name of Issuer				
AMEDICA Corp				
Street Address 1		Street Address 2		
1885 WEST 2100 STREET SOU				
City	State/Province/Coun	try ZIP/Postal	Code Phone No. of Issuer	
SALT LAKE CITY	UTAH	84119	801-839-3516	
3. Related Persons				
Last Name	First Name		Middle Name	
Olson	Eric		K.	
Street Address 1		Street Address 2] [[
c/o Amedica Corporation		1885 West 2100	Street South	7
City	State/Province/Co		ZIP/Postal Code	4
Salt Lake City	UTAH	ountry	84119	
San Lake City	UTAII		0411)	
Relationship:	xecutive Officer	▽ Director	Promoter	
Kciationsmp.	Accutive Officer	Director	1 Tomotei	_
Clarification of Response (if Nece	essary)			
·				_
Last Name	First Name		Middle Name	
Link	Max			
Stroot Address 1		Street Address 2		

c/o Amedica Corporation

1885 West 2100 Street South

Salt Lake City	UTAH		84119	
Relationship:	Executive Officer	☑ Director	Promoter	
Clarification of Respons	e (if Necessary)			
	(111100000011))			
Last Name	First Name	7	Middle Name	
Bal	Sonny			
Street Address 1		Street Address 2		
c/o Amedica Corpor	ation			
City	State/Province	e/Country 2	ZIP/Postal Code	
Salt Lake City	UTAH		84119	
<u> </u>				
Relationship:	Executive Officer	☑ Director	Promoter	
Clarification of Doon	o (if Nagassawı)			
Clarification of Respons	e (ii Necessary)			
<u>L</u>				
Last Name	First Name	7	Viiddle Name	
Honigblum	Gregg		R.	
Street Address 1		Street Address 2	T.	
c/o Amedica Corpor	ation	1885 West 2100 St	treet South	_
City	State/Province		ZIP/Postal Code	
Salt Lake City	UTAH		84119	
Suit Eure City	CIAN		01117	
Relationship:	Executive Officer	▼ Director	Promoter	
	*	20000	L.:	
Clarification of Respons	se (if Necessary)			
Last Name	First Name	,	Middle Name	
Moyes	Jay		M.	
Street Address 1	Jay	Street Address 2	1/1.	
	ation .	1885 West 2100 St	troot South	_
c/o Amedica Corpor				
City	State/Province	e/Country 2	ZIP/Postal Code 84119	
Salt Lake City	UTAH		84119	
Dolotio wokima	Executive Officer	Director.	Puomoton	
Relationship:	Executive Officer	Director	Promoter	
Clarification of Respons	e (if Necessary)			
Last Name	First Name		Middle Name	
Patel	Rohit			
Street Address 1		Street Address 2		
c/o Amedica Corpor	ation	1885 West 2100 St	treet South	

Salt Lake City		UTAH		84119	
Relationship:	Execu	itive Officer	☑ Director	Promoter	
Clarification of Respo	nse (if Necessar	ry)			
Last Name		First Name		Middle Name	
Singer		George			
Street Address 1			Street Address	2	
c/o Amedica Corpo	oration		1885 West 210	00 Street South	
City		State/Province	e/Country	ZIP/Postal Code	
Salt Lake City		UTAH		84119	
			1	1	
Relationship:	Execu	itive Officer	Director	Promoter	
Clarification of Respo	nse (if Necessar	ry)			
Last Name		First Name		Middle Name	
Truetzel		David			
Street Address 1			Street Address	2	
c/o Amedica Corpo	oration		1885 West 210	00 Street South	
City		State/Province	e/Country	ZIP/Postal Code	
Salt Lake City		UTAH		84119	
			1		
Relationship:	Execu	itive Officer	☑ Director	Promoter	
Clarification of Respo	nse (if Necessar	ry)			
Last Name		First Name		Middle Name	
McEntire		Bryan		J.	
Street Address 1			Street Address	2	
c/o Amedica Corpo	oration		1885 West 210	00 Street South	
City		State/Province	e/Country	ZIP/Postal Code	
Salt Lake City		UTAH		84119	
Relationship:	Execu	ıtive Officer	☐ Director	Promoter	
Clarification of Respo	nse (if Necessar	rv)	11		
Can incation of Respo	(11 110CCSSAI	` , , ,			
<u> L</u>					
					—
Last Name		First Name		Middle Name	
Davis		Kevin			
Street Address 1			Street Address	<u></u>	
c/o Amedica Corpo			1	00 Street South	
270 Mineurea Corpo	J. acivii		1000 17 656 210		

Salt Lake City		UTAH		84	84119	
Relationship:	Execut	ive Officer	☐ Dir	ector	Promoter	
Clarification of Respon	se (if Necessary	r)				
4. Industry Gr	nun					
-	oup	Health (Care	c	Detelling	
Agriculture	10 .	C Bio	otechnology		Retaining	
Banking & Financi		C He	alth Insuran	ce C	Restaurants	
C Commercial B	anking	2000	spitals & Ph		Technology	
C Insurance		00000	armaceutical		C Computers	
C Investing C Investment Bar	alvin a	⊙ Otl	her Health C	are	C Telecommunications	
C Pooled Investm	_				C Other Technology	
Other Banking					Travel	
C Services	& Financiai	C Manufa	cturing		C Airlines & Airports	
Business Services		Real Est	tate		C Lodging & Conventions	
Energy		C Co	mmercial		C Tourism & Travel Services	
C Coal Mining		C Co	nstruction		C Other Travel	
C Electric Utilitie	s	C RE	ITS & Finar	ice C	Other	
C Energy Conser		C Res	sidential			
C Environmental	Services	C Otl	her Real Esta	ate		
Oil & Gas						
C Other Energy						
5. Issuer Size						
Revenue Range			Aggreg	gate Net Asset Va	lue Range	
No Revenues			0	No Aggregate N	Net Asset Value	
\$1 - \$1,000,000			C	\$1 - \$5,000,000		
\$1,000,001 - \$5	,000,000		0	\$5,000,001 - \$25	5,000,000	
\$5,000,001 - \$2	5,000,000		0	\$25,000,001 - \$5	50,000,000	
\$25,000,001 - \$	100,000,000		0	\$50,000,001 - \$1	100,000,000	
Over \$100,000	000		0	Over \$100,000,	000	
Decline to Disc			0	Decline to Discl	lose	
Not Applicable			0	Not Applicable		
T. T				FF		
6. Federal Ex apply)	emption(s	s) and Ex	clusion	(s) Claime	d (select all that	
Rule 504(b)(1) (1	not (i), (ii)	-				
or (iii))	(-)) (**)	Rul	le 505			
Rule 504 (b)(1)(i)	□ Rul	e 506(b)			
Rule 504 (b)(1)(i	i)		le 506(c)			
Rule 504 (b)(1)(i	ii)			ection 4(a)(5)		
	-	560				
		Investment Company Act Section 3(c)				

7. Type of Filing
New Notice Date of First Sale 2012-12-17 First Sale Yet to Occur
Amendment Amendment
8. Duration of Offering
Does the Issuer intend this offering to last more than one year? Yes No
9. Type(s) of Securities Offered (select all that apply)
Pooled Investment Fund Equity
Tenant-in-Common Securities Debt Debt Option, Warrant or Other Right to
Mineral Property Securities Acquire Another Security Security to be Acquired Upon
Exercise of Option, Warrant or Other (describe) Other Right to Acquire Security
10. Business Combination Transaction
Is this offering being made in connection with a business combination transaction, such as a merger, acquisition or exchange offer?
Clarification of Response (if Necessary)
11. Minimum Investment
Minimum investment accepted from any outside investor USD
ilivestoi
12. Sales Compensation
Recipient CRD Number None
(Associated) Broker or Dealer CRD
(Associated) Broker or Dealer None Number None
Street Address 1 Street Address 2
City State/Province/Country ZIP/Postal Code
State(s) of Solicitation All States
13. Offering and Sales Amounts
Total Offering Amount \$ 540000 USD ☐ Indefinite Total Amount Sold \$ 540000 USD
Total Remaining to be S I I Indefinite
Sold

Clarification of Response (if Necessary)

Issuer issued two warrants to purchase an aggregate of 270,000 shares of its Series F Convertible Preferred Stock, par value \$0.01 per share, at an exercise price of \$2.00 per share, in connection with the Issuer entering into a secured credit facility.

14. Investors
Select if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, Number of such non-accredited investors who already have invested in the offering
Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:
15 Color Commissions 9 Findows' Food Expanses
15. Sales Commissions & Finders' Fees Expenses
Provide separately the amounts of sales commissions and finders' fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.
Sales Commissions \$ 0 USD Estimate
Finders' Fees \$ 0 USD
Clarification of Response (if Necessary)
16. Use of Proceeds
Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.
\$ USD Estimate
Clarification of Response (if Necessary)
Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each Issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities
 described and undertaking to furnish them, upon written request, the information furnished to
 offerees.
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the Issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against it in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which the issuer maintains its principal place of business or any State in
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not
 disqualified from relying on Regulation D for one of the reasons stated in Rule 505(b)(2)(iii) or Rule

506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
AMEDICA CORP	/s/ Eric K. Olson	Eric K. Olson	President and CEO	2012-12-31