FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPRO	VAL
OMB Number:	3235-0287
Estimated average b	urden
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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

Name and Address of Reporting Person * Nothias Jean-Yves			2. Issuer Name and Ticker or Trading Symbol SCYNEXIS INC [SCYX]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) C/O SCYNEXIS, INC.,, 3501 C TRICENTER BOULEVARD			3. Date of Earliest Transaction (Month/Day/Year) 10/01/2014					_		re title below)		r (specify below)		
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
DURHAM, NC 27713 (City) (State) (Zip)			Tabla I - Non-Derivativa Securities Acqu					ies Acquire	nired, Disposed of, or Beneficially Owned					
1.Title of S (Instr. 3)	Title of Security 2. Transaction		2A. Deemed 3. Tran Execution Date, if Code		A. Securities Action (A) or Disposed (Instr. 3, 4 and 5)		cquired of (D) Owned Follow Transaction(s) (Instr. 3 and 4		Securities Beneficially wing Reported OFF For Securities Beneficially OFF For Security OFF		. 7. Ownership of orm: Be Oirect (D) Ov r Indirect (Ir	eneficial wnership		
Reminder:	Report on a	separate fine for each	ii ciass of securities											
Reminder:	Report on a	separate line for each	Table II -				contai form d quired, Disp	ns who responded in this followed in this followed in this followed in the second of the second in t	orm are no rrently va meficially (ot required lid OMB co	l to respor	nd unless th		74 (9-02)
1. Title of	2. Conversion	3. Transaction	Table II - (3A. Deemed Execution Date, if	4. Transact	5. Nu 5. Nu of Deriv Secur Acqu (A) o Dispo	mber vative rities ired or osed	contai form of quired, Disp s, options, c 6. Date Exe Expiration (Month/Da	ined in this for displays a cur posed of, or Be onvertible secretisable and Date	orm are no rrently va meficially (ot required lid OMB co Owned d Amount ying	8. Price of Derivative Security (Instr. 5)	nd unless th	Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indirec Beneficia Ownershi (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction	Table II - (3A. Deemed Execution Date, if	4. Transact	5. Nucion of Deriv Secur Acqu (A) of Dispo of (D (Instr	rrant imber vative rities ired r osed)	contai form of quired, Disp s, options, c 6. Date Exe Expiration (Month/Da	ined in this for displays a curbosed of, or Be convertible secretisable and Date y/Year)	rrently va eneficially (urities) 7. Title an of Underly Securities	ot required lid OMB co Owned d Amount ying	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	To. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indirec Beneficia Ownershi (Instr. 4)

Reporting Owners

B G O N (A)	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Nothias Jean-Yves C/O SCYNEXIS, INC., 3501 C TRICENTER BOULEVARD DURHAM, NC 27713	Х				

Signatures

/s/ Eileen Pruette, by power of attorney	10/02/2014
**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) The option is fully vested on the date of the grant.

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.