

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

| OMB APPROVAL | | | | |
|-------------------|-------|--|--|--|
| OMB | 3235- | | | |
| Number: | 0104 | | | |
| Estimated average | | | | |
| burden hours pe | r | | | |
| response | 0.5 | | | |

INITIAL STATEMENT OF 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

| (Print or Type Responses) | | | | | | |
|--|---|---|---|-------|---|--|
| 1. Name and Address of Reporting Person [*] – Taglietti Marco | 2. Date of Event Requiring Statement (Month/Day/Year) 11/27/2014 | ng 3. Issuer Name and Ticker or Trading Symbol SCYNEXIS INC [SCYX] | | | | |
| (Last) (First) (Middle) C/O SCYNEXIS, INC., 3501 C TRICENTER BLVD. | 11/27/2014 | 4. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director10% Owner Officer (giveOther (specify title below)below) | | | 5. If Amendment, Date Original Filed(Month/Day/Year) | |
| (Street) DURHAM, NC 27713 | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person | |
| (City) (State) (Zip) | Table I - Non-Derivative Securities Beneficially Owned | | | | | |
| 1.Title of Security (Instr. 4) | 2. Amount of Beneficially ((Instr. 4) | | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | Owner | 1 | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. Persons who respond to the collection of information contained in this form are SEC 1473 (7-02)

not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exer and Expirati (Month/Day/Ye | on Date | Secu | rities Underlying vative Security | or Exercise | Ownership | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|---|---|--------------------|-------|--------------------------------------|------------------------|---|---|
| | Date Exercisable | Expiration Date | Title | Amount or Number | Derivative Security | Security: Direct (D) or Indirect (I) (Instr. 5) | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|---|---------------|-----------|---------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| Taglietti Marco C/O SCYNEXIS, INC. 3501 C TRICENTER BLVD. DURHAM, NC 27713 | Х | | | | | |

Signatures

| /s/ Andrew J. Novak, by power of attorney | 12/03/2014 |
|---|------------|
| **Signature of Reporting Person | Date |

Explanation of Responses:

No securities are beneficially owned

- * If the form is filed by more than one reporting person, see Instruction 5(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.

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.

LIMITED POWER OF ATTORNEY FOR SECTION 16 REPORTING OBLIGATIONS

Know all by these presents, that the undersigned hereby makes, constitutes and appoints each Charles Osborne, Eileen Pruette and Andrew Novak as the undersigned's true and lawful attorney-in-fact, with full power and authority

- (1) prepare, execute, acknowledge, deliver and file Forms 3, 4, and 5 (including any amendments thereto) with respect to the securities of Scynexis, Inc., a Delaware corporation (the "Company"), with the SEC, any national securiti
- (2) seek or obtain, as the undersigned's representative and on the undersigned's behalf, information on transactions in the Company's securities from any third party, including brokers, employee benefit plan administrators and truste
- (3) perform any and all other acts which in the discretion of each such attorney-in-fact are necessary or desirable for and on behalf of the undersigned in connection with the foregoing.

The undersigned acknowledges that:

- (1) this Limited Power of Attorney authorizes, but does not require, each such attorney-in-fact to act in their discretion on information provided to each such attorney-in-fact without independent verification of such information;
- (2) any documents prepared and/or executed by each such attorney-in-fact on behalf of the undersigned pursuant to this Limited Power of Attorney will be in such form and will contain such information and disclosure as each such
- (3) neither the Company nor such attorneys-in-fact assumes (i) any liability for the undersigned's responsibility to comply with the requirement of the Exchange Act, (ii) any liability of the undersigned for any failure to comply with
- (4) this Limited Power of Attorney does not relieve the undersigned from responsibility for compliance with the undersigned's obligations under the Exchange Act, including without limitation the reporting requirements under Sect
- The undersigned hereby gives and grants the foregoing attorneys-in-fact full power and authority to do and perform all and every act and thing whatsoever requisite, necessary or appropriate to be done in and about the foregoing manual states and the states of the stat

This Limited Power of Attorney shall remain in full force and effect until revoked by the undersigned in a signed writing delivered to each such attorney-in-fact.

IN WITNESS WHEREOF, the undersigned has caused this Limited Power of Attorney to be executed as of this 25th day of November, 2014.

/s/ Marco Taglietti, M.D.