STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

CIVITED STATES SECORITIES AND EXCHANGE COMMISSION	
Washington, D.C. 20549	

UNITED STATES SECUDITIES AND EVOUANCE COMMISSION

OMB APPROVAL				
OMB Number:	3235-0287			
Estimated average burden				
nours 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

(Print or Type Responses) 2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting Person(s) to Issuer 1. Name and Address of Reporting Person * (Check all applicable) Taglietti Marco SCYNEXIS INC [SCYX] 10% Owner 3. Date of Earliest Transaction (Month/Day/Year) C/O SCYNEXIS, INC., 3501 C TRICENTER 12/02/2014 BLVD. (Street) 4. If Amendment, Date Original Filed(Month/Day/Year) 6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person
Form filed by More than One Reporting Person DURHAM, NC 27713 (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1.Title of Security 4. Securities Acquired 5. Amount of Securities Beneficially 7 Nature 2. Transaction 2.A Deemed 3 Transaction Owned Following Reported Ownership of Indirect Execution Date, if (A) or Disposed of (D) (Instr. 3) Date Code (Instr. 8) (Month/Day/Year (Instr. 3, 4 and 5) Beneficial Transaction(s) Form: any (Month/Day/Year (Instr. 3 and 4) Direct (D) Ownership or Indirect (Instr. 4) (A) or Code (D) (Instr. 4) Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. Persons who respond to the collection of information SEC 1474 (9-02) contained in this form are not required to respond unless the form displays a currently valid OMB control number. Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 5. Number 6. Date Exercisable and 1. Title of 3. Transaction 3A. Deemed 7. Title and Amount 8. Price of 9. Number of 10. 11. Nature of Underlying Derivative Conversion Date Execution Date, if Transaction of Expiration Date Derivative Derivative Ownershir of Indirect Security or Exercise (Month/Day/Year) anv Code Derivative (Month/Day/Year) Securities Security Securities Form of **Beneficial** (Month/Day/Year) (Instr. 8) (Instr. 3) Price of Securities (Instr. 3 and 4) (Instr. 5) Beneficially **Derivative** Ownership Derivative Acquired Owned Security: Instr. 4) Following Direct (D) Security (A) or Disposed Reported or Indirect of (D) Transaction(s) (I) (Instr. 3, 4 (Instr. 4) (Instr. 4) and 5) Amount Date Expiration Title Exercisable Date Number Code (A) of Shares Stock Option Common

Reporting Owners

\$ 10.81

\$ 10.81

(right to

(right to

buy)

buy) Stock Option

Donostino Ossas None / Adduses	Relationships			
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
Taglietti Marco C/O SCYNEXIS, INC. 3501 C TRICENTER BLVD. DURHAM, NC 27713	X			

12/02/2014

12/02/2014

Signatures

/s/ Andrew J. Novak, by power of attorney	12/04/2014
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).

A

A

7,830

1,530

<u>(1)</u>

(2)

12/01/2024

12/01/2024

7,830.00

1,530.00

\$ 0

Stock

Common

Stock

7,830

1,530

D

D

- One-hundred percent (100%) of the shares subject to the option vest on the earlier of (i) the first anniversary of the date of grant, and (ii) the date of the next Annual Meeting of Stockholders of the Issuer.
- (2) 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.