FORM 4

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

OMB APPRO	OVAL
OMB Number:	3235-0287
Estimated average	burden
hours per response	0.5

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

es)												
Name and Address of Reporting Person * Taglietti Marco			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., 101 HUDSON STREET, SUITE 3610			3. Date of Earliest Transaction (Month/Day/Year) 08/22/2017					X Officer (give title below) Other (specify below) Chief Executive Officer				
(Street) JERSEY CITY, NJ 07302			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				
(State)	(Zip)	Tab	le I - Non-	-Deriv	vative Se	ecurities .	Acqui	ired, Dispo	osed of, or l	Beneficially	Owned	
Da	te onth/Day/Year)	Execution Date, if any	f Code (Instr. 8)		(A) or Disposed of (D) (Instr. 3, 4 and 5)		of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Following (s)	Ownership of Form: Be Direct (D)	. Nature f Indirect geneficial Ownership
			Code	V	Amount	(A) or t (D)	Price					Instr. 4)
08.	/22/2017		P		7	IA I		287,007			D	
08.	/23/2017		P		4,993			292,000			D	
separate line for ea	ach class of secu	ities beneficially o		Perso	ons wh	n this for	rm are	e not req	uired to re	spond unl	ess	C 1474 (9- 02)
						,,		-				
	(6.	g., puts, calls, war	rrants, opt									
3. Transaction Date (Month/Day/Yea	3A. Deemed Execution Dat r) any	4. Transaction Code (Instr. 8)	5. Number	6. Da	convert ate Exerc Expiration	cisable on Date	7. Tanda Ama Und Secu			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form of Derivativ Security: Direct (D or Indirect	(Instr. 4)
5	(First) NC., 101 HUDS 610 (Street) 07302 (State) 2. 7 Dat (M	(First) (Middle) NC., 101 HUDSON 610 (Street) 07302 (State) (Zip) 2. Transaction Date (Month/Day/Year) 08/22/2017 08/23/2017 separate line for each class of secur	SCYNEXIS INC SCYNEXIS INC SCYNEXIS INC SCYNEXIS INC 3. Date of Earliest 08/22/2017 4. If Amendment, 1. 1. 1. 1. 1. 1. 1. 1	SCYNEXIS INC [SCYX (First) (Middle) NC., 101 HUDSON (Street) (Street) (State) (Zip) (Zip) (Zip) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (And the properties of securities beneficially owned direct the content of the properties of the content of the conten	SCYNEXIS INC [SCYX] SCYNEXIS INC [SCYX] SCYNEXIS INC [SCYX] 3. Date of Earliest Transaction (Month/2017) O8/22/2017 4. If Amendment, Date Original Find (Month/2017) State	SCYNEXIS INC [SCYX] SCYNEXIS INC [SCX] SCYNEXIS	SCYNEXIS INC [SCYX]	SCYNEXIS INC [SCYX] 3. Date of Earliest Transaction (Month/Day/Year) 08/22/2017 4. If Amendment, Date Original Filed(Month/Day/Year) 07302 (State) (Zip) Table I - Non-Derivative Securities Acquired Execution Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Instr. 8) (D) (Instr. 3, 4 and 5) (A) or (D) (Price Day/22/2017 P 4,993 A 1.85 (D) (D)	SCYNEXIS INC [SCYX] X_ Direct X_ Office X_ Off	SCYNEXIS INC [SCYX] (Check (First) (Middle) (Street) (Street) (A. If Amendment, Date Original Filed(Month/Day/Year) (State) (Zip) (A. Deemed Execution Date, if (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (A. Deemed Execution Date, if (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (A. Deemed Execution Date, if (Month/Day	SCYNEXIS INC [SCYX] Check all applic X_Director X_Officer (give title below) X_Offi	SCYNEXIS INC [SCYX] X_ Director 10% Owner 10%

Reporting Owners

Barrellan Orana Nama / Addana	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Taglietti Marco					
C/O SCYNEXIS, INC.	x		Chief Executive Officer		
101 HUDSON STREET, SUITE 3610	A	Λ		Chief Executive Officer	
JERSEY CITY, NJ 07302					

Signatures

/s/ Robert F. Joyce Jr., by Power of Attorney	08/24/2017
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).

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 nu	mber.