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McCourt M Form 4	arion									
January 04,	2018									
FORM	ЛД								PPROVAL	
	UNITED	STATES		RITIES A shington			COMMISSIO	N OMB Number:	3235-0287	
Check the if no lor subject to Section Form 4 Form 5			SECU	RITIES		WNERSHIP OI	Estimated burden hou response	urs per		
obligatio may cor <i>See</i> Inst 1(b).	ons Section 17((a) of the H	Public U	tility Hol	ding Cor		of 1935 or Secti			
(Print or Type	Responses)									
1. Name and Address of Reporting Person <u>*</u> McCourt Marion			2. Issuer Name and Ticker or Trading Symbol SCYNEXIS INC [SCYX]			5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (Middle)			3. Date of Earliest Transaction				(Ch	eck all applicabl	e)	
			(Month/Day/Year) 01/02/2018				X_ Director10% Owner Officer (give titleOther (specify below)Other (specify			
				endment, Date Original nth/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
JERSEY C	ITY, NJ 07302							More than One R		
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution I any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Re	port on a separate line	e for each cla	uss of sect	urities bene	Perso	ons who rest nation cont	or indirectly. spond to the colle ained in this forr	n are not	SEC 1474 (9-02)	

Persons who respond to the collection of information 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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8.
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities	D
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	S

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(Instr. 3)	Price of Derivative Security	(Month/Day/Year)	(Instr. 8)	(A) or Dispose (D)	Disposed of (D) (Instr. 3, 4,					(I
			Code V	/ (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy)	\$ 2.28	01/02/2018	А	6,831		01/02/2018	01/01/2028	Common Stock	6,831	\$

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
McCourt Marion 101 HUDSON STREET SUITE 3610 JERSEY CITY, NJ 07302	Х						
Signatures							
Robert F. Joyce Jr., by Power of Attorney	of	01/04	4/2018				

**Signature of Reporting Person

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).

Date

(1) This option was issued to the Reporting Person pursuant to the Issuer's Compensation Arrangement with Non-Employee Directors policy in lieu of the Reporting Person's annual cash retainers (paid quarterly) under such policy.

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.