SCYNEXIS

Q1 2022 Earnings Call

May 12, 2022

Forward Looking Statement

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Agenda

Welcome & Opening Remarks	Debbie Etchison
Q1 2022 Overview	Marco Taglietti, M.D.
Commercial Highlights	Christine Coyne
Pipeline Update	David Angulo, M.D.
Financial Update	Larry R. Hoffman
Conclusion	Marco Taglietti, M.D.
Q&A	

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Marco Taglietti, M.D.

President and CEO

Q1 2022 Overview

Recent Accomplishments and Near-Term Goals

R&D

- Positive FURI & CARES interim data
- sNDA filing for rVVC in Q2 2022
- MARIO study initiated with first patient expected by end of Q2 2022

Commercial

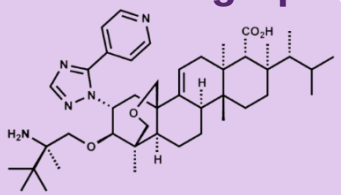
- Growing BREXAFEMME adoption
- Expanding coverage ~55% commercial lives covered to date
- 4,000 Rx/~ $700,000 in Q1 2022 net sales

Corporate

- Ended Q1 2022 with >$95M in Cash
- Raised $45M in Q2 2022 with cash runway into Q1 2024
- Keep building broad antifungal franchise
- Pursue international partnerships

Making Ibrexafungerp a Successful Antifungal Franchise

ibrexafungerp



First in class antifungal
Broad spectrum
Oral and IV

June 2021
FDA approval of BREXAFEMME

Q2 2022
rVVC regulatory submission

Dec. 2022
Potential FDA approval in rVVC

H1 2024
MARIO Invasive candidiasis & FURI/CARES regulatory submissions

2H 2024
Potential approval of stepdown therapy in invasive candidiasis and resistant/refractory hospital infections

2025 and beyond

$700M-$800M Potential Antifungal Franchise

2021 | 2022 | 2023 | 2024 | 2025+

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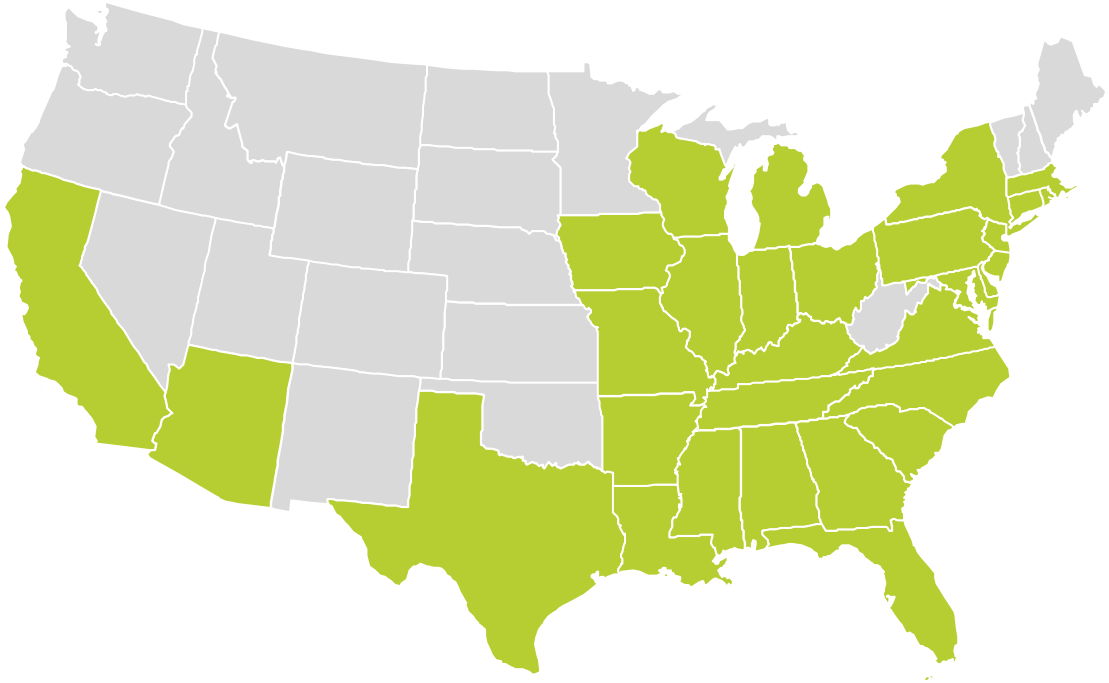
Christine Coyne

Chief Commercial Officer

Commercial Highlights

Launch Awareness Building Since the Beginning

VVC Market Geographically Concentrated



Targeted Deployment

- Primary call points are OBGYN, NP/PA, and select PCP in women's health
- Ensuring appropriate reach and frequency to key HCPs
- Sales team target **70**
- Cover **89%** of the market potential
- Conducting **in-person and virtual** sales calls

The Differentiating Benefits of BREXAFEMME Motivate Prescribers*

BREXAFEMME kills yeast, allowing for patients to be treated differently

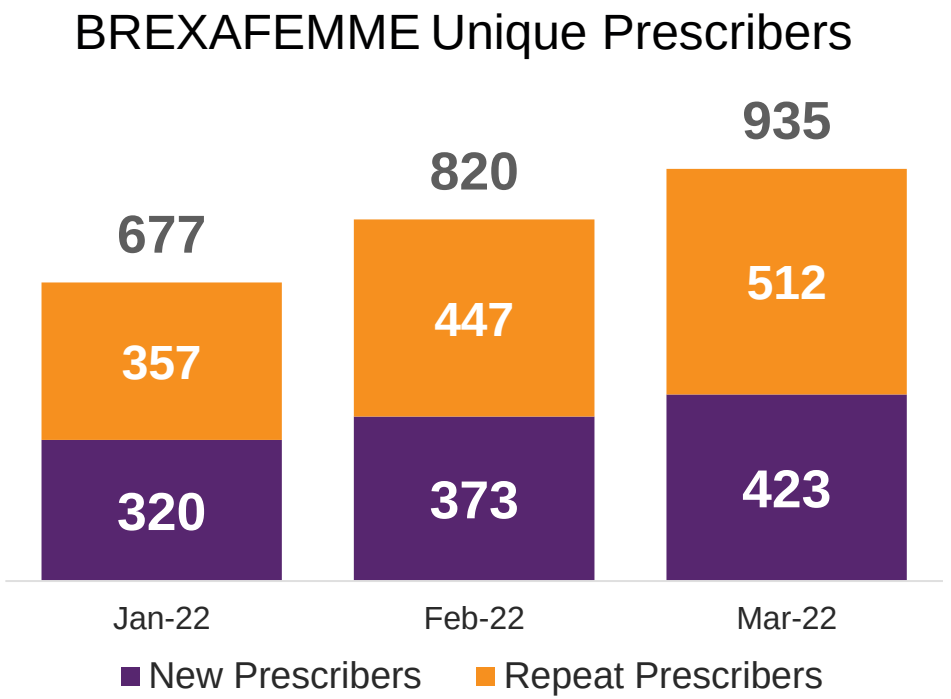
- ✓ First and only oral fungicidal therapy that cures vaginal yeast infections[1]
- ✓ Rapid symptom relief with complete cure after receiving one-day, oral dose**
- ✓ Active against all *Candida* species that cause VVC, including azole-resistant strains[2]
- ✓ High tissue penetration

(1) BREXAFEMME Prescribing Information. SCYNEXIS, Inc.; 2021. (2) Data on File. SCYNEXIS, Inc., Jersey City, NJ
*Source: ATU Market Research Conducted post launch in Q4 2021
**Post hoc analyses of mITT data

BREXAFEMME Continues to Expand Pool of Prescribers in Q1

Prescriber Growth

+14% Mar 2022 vs. Feb 2022



- More than 1,800 unique HCPs prescribed BREXAFEMME in Q1 2022 with 1,100 doing so for the 1st time
- Half of BREXAFEMME prescribers in Q4 2021 used the product again in Q1 2022

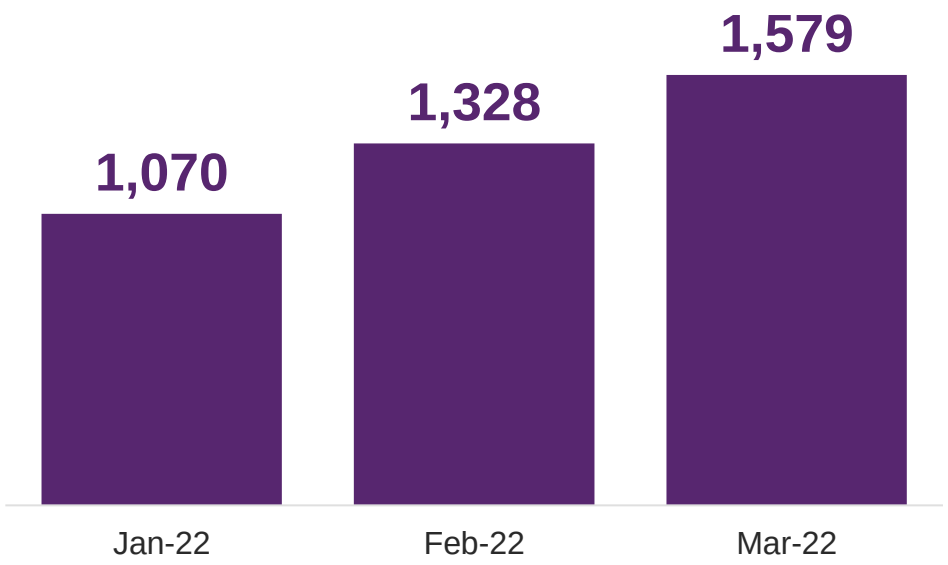
Source: IQVIA

BREXAFEMME Has Positive Momentum Entering Q2

TRx Growth

+19% Mar 2022 vs. Feb 2022

BREXAFEMME Q1 Monthly TRx Volume



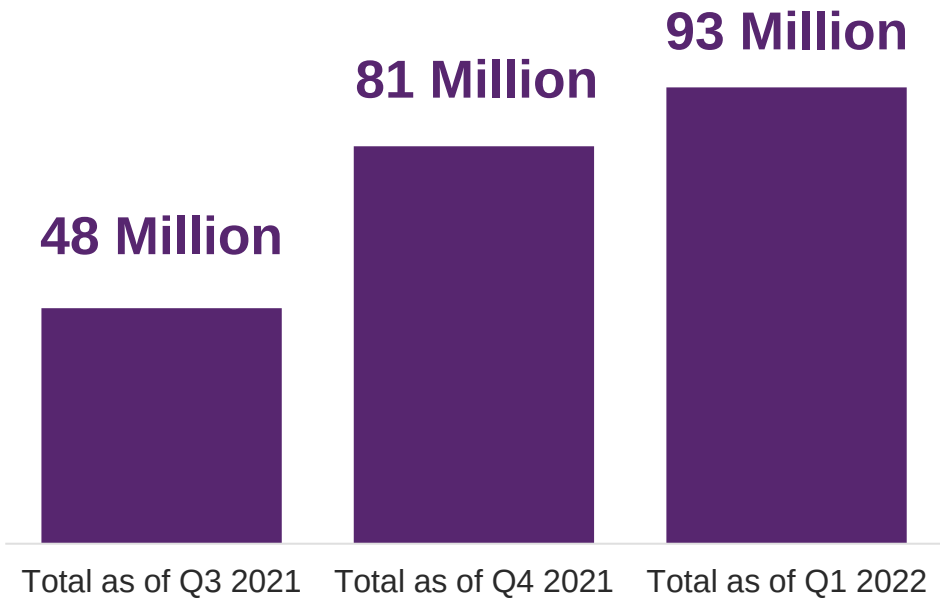
- Growing BREXAFEMME prescription (TRx) volume through effective field execution and marketing
- Monthly growth in BREXAFEMME prescribing behavior came from adding new prescribers & broader adoption among repeat prescribers

Source: IQVIA

BREXAFEMME Continues to Secure Favorable Formulary Coverage

Coverage Growth
Commercial Lives
+15% Q1 2022 vs. Q4 2021

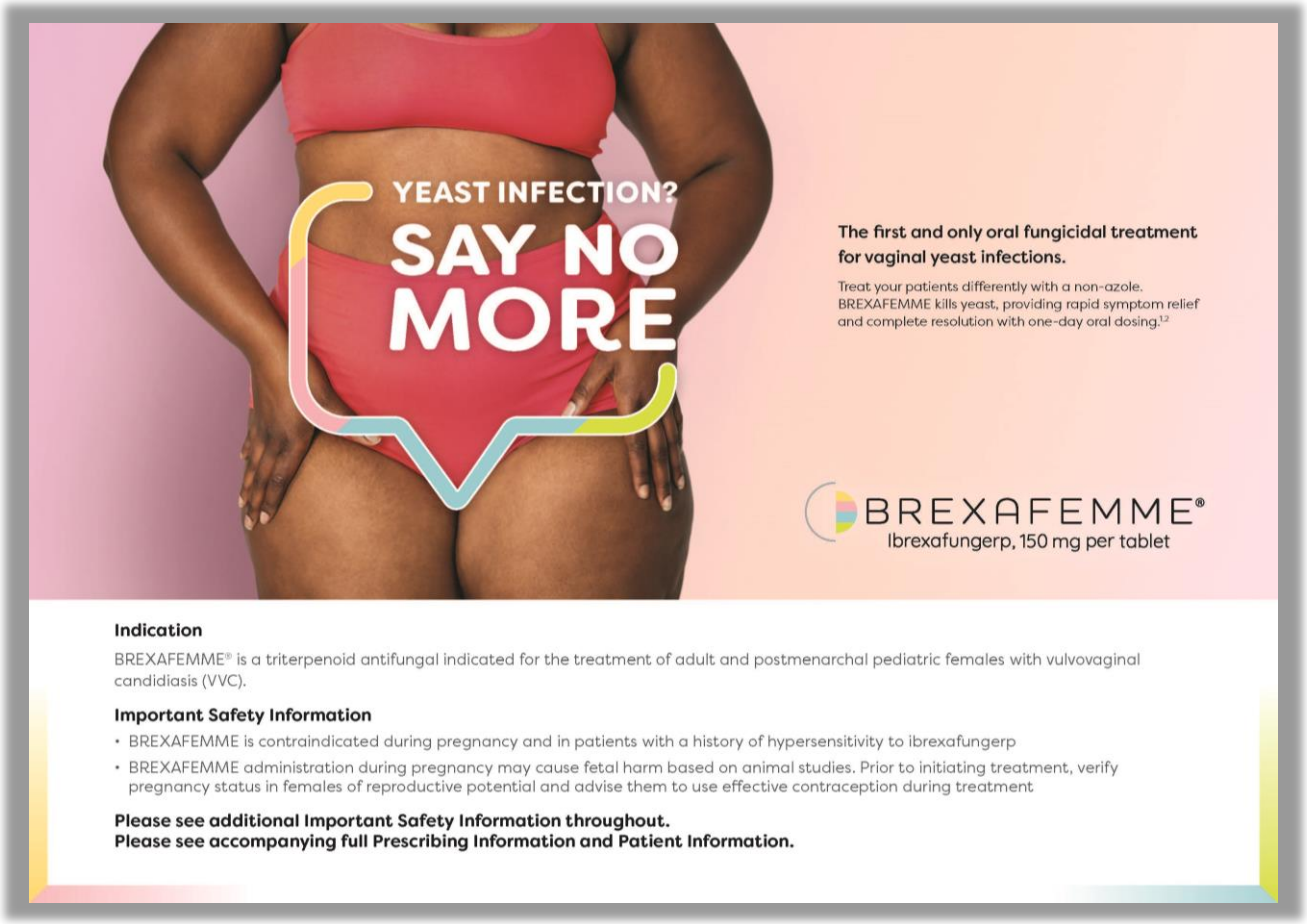
BREXAFEMME Covered Lives - Commercial



- Over 93 million (55%) of commercially-insured patients are covered for BREXAFEMME as of Q1 2022
- Large PBMs and payers have been responsive to the high unmet need and clinical value of the first (and only) non-azole oral therapy to treat vaginal yeast infections

Source: MMIT

Campaign is Memorable and Includes New Data and Messaging

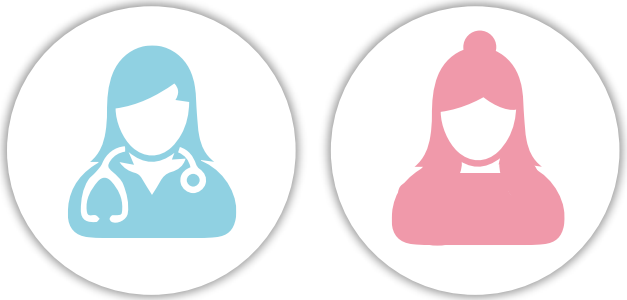


- FIRST AND ONLY FUNGICIDAL TREATMENT
- RAPID SYMPTOM RELIEF
- BROAD SPECTRUM ACTIVITY

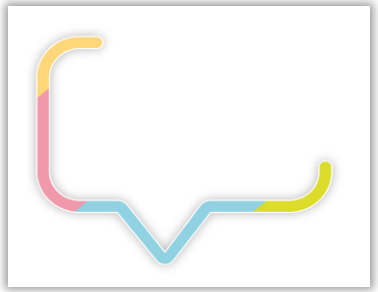
Targeted DTP Plan to Generate Awareness and Activate Patients

HCP Campaign

Drive HCP-Patient Discussion



DTP Activation



- Paid Search
- Banner Ads
- Paid Social Video Ads
- Patient Website Update
- Patient Waiting Room Brochure
- Patient Brochure (English & Spanish)

- Leverage HCP campaign to drive HCP-patient discussion
- Goal is to activate women seeking yeast infection treatment to ask their HCP for BREXAFEMME

Amplifying Brand Awareness Through Additional Consumer – Focused Communications Activities

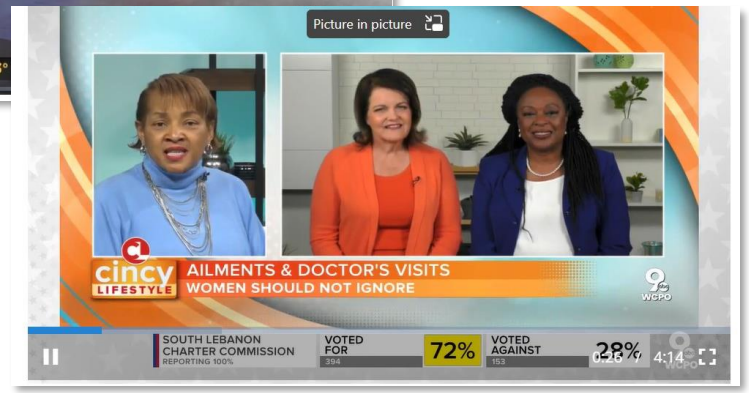
Women's Health Month Satellite Media Tour and Media Pitching

May 4, 2022: San Francisco Studio – Nationwide broadcast media interviews – live and taped

Call to Action: Drive traffic to BREXAFEMME.com using www.YourVHealth.com

Results: Conducted **26 broadcast** media interviews

Target Market Reach Included: Miami, Charlotte, Washington, DC, Cincinnati, Pittsburgh, Dallas, Houston, Salt Lake City and Seattle.



Spokespersons:

Nkechi Azie, M.D., FIDSA
SCYNEXIS VP, Clinical Development and Medical Affairs

Barbara Dehn, RN, MS, NP
Nurse Practitioner, author, speaker and Health Expert

Cumulative Momentum Continues to Build Entering Q2

OPTIMIZED SALES FORCE EXECUTION

Incorporating recent learnings and payer coverage wins

GREATER HCP CONFIDENCE

HCPs seeking a fungicidal option given azole limitations & increasing resistance

PATIENT ACTIVATION

“Say No More” DTP to activate patients seeking yeast infection treatment

INCREASING BASE OF PRESCRIBERS

Prescribers using BREXAFEMME in more than one patient continues to increase

HYPER-FOCUSED TARGETING

Plan to focus patient efforts within key geographies with target prescribers

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David Angulo, M.D.

Chief Medical Officer

R&D Pipeline Update

Future Expansion of the VVC Franchise

- **sNDA for prevention of recurrent VVC** in Q2 2022 with potential FDA approval by end of 2022
  - Based on the positive Phase 3 Study CANDLE vs. Placebo

Primary Endpoint was Clinical Success (i.e. no recurrences, not even suspected ones)

65.4% of patients receiving ibrexafungerp achieved **Clinical Success*** vs. placebo by having no recurrence **at all** (p=0.02)

Sustained Clinical Response

Sustained response over the three-month follow-up period (p=0.034)

- Activity of ibrexafungerp in **fluconazole failure patients with VVC**
  - 24 VVC patients who failed to respond to a three-day regimen of fluconazole
  - 71% successfully achieved a significant reduction or elimination of signs and symptoms after **one-day treatment with ibrexafungerp**

*Clinical Success defined as absence of confirmed, presumed, or even suspected recurrence.

Oral Ibrexafungerp to Address Multiple Unmet Needs in the Hospital Setting

Invasive Candidiasis

MARIO
Phase 3, randomized, **oral step-down** trial in Invasive Candidiasis

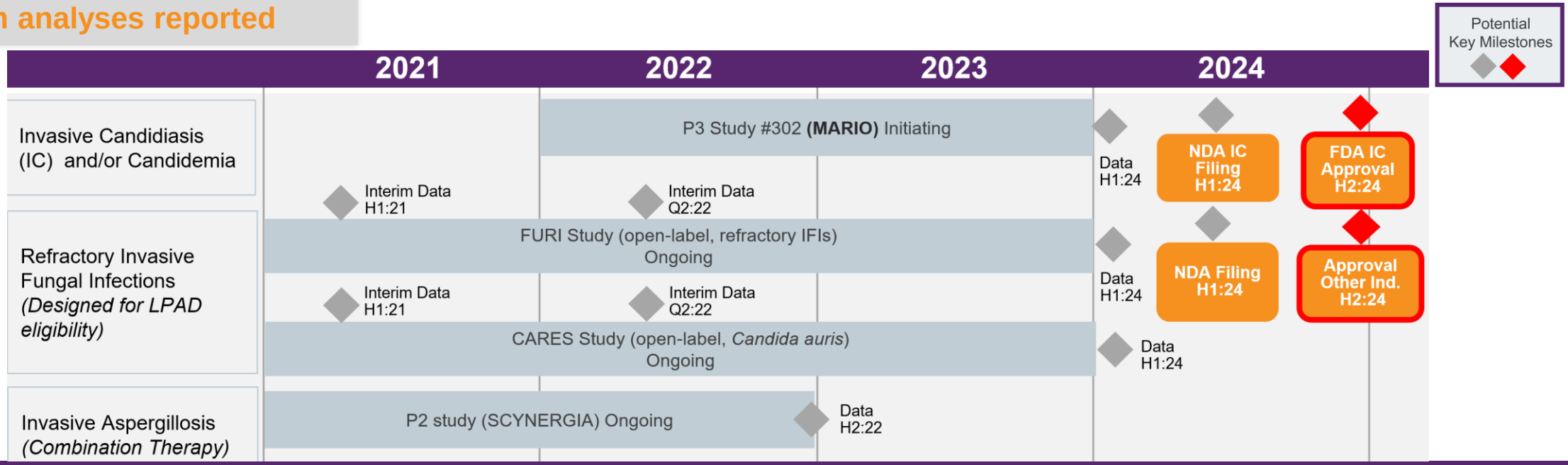
CARES
Phase 3, open label trial in *Candida auris* infections
Two interim analyses reported

Refractory/Resistant Infections

FURI
Phase 3, open label trial in *Candida, Aspergillus* and mucormycosis
Four interim analyses reported

Invasive Aspergillosis

SCYNERGIA
Phase 2, randomized trial in Invasive Pulmonary Aspergillosis



April 2022 – Interim Analyses of FURI-CARES

DRC Reviewed Global Response at End of Treatment

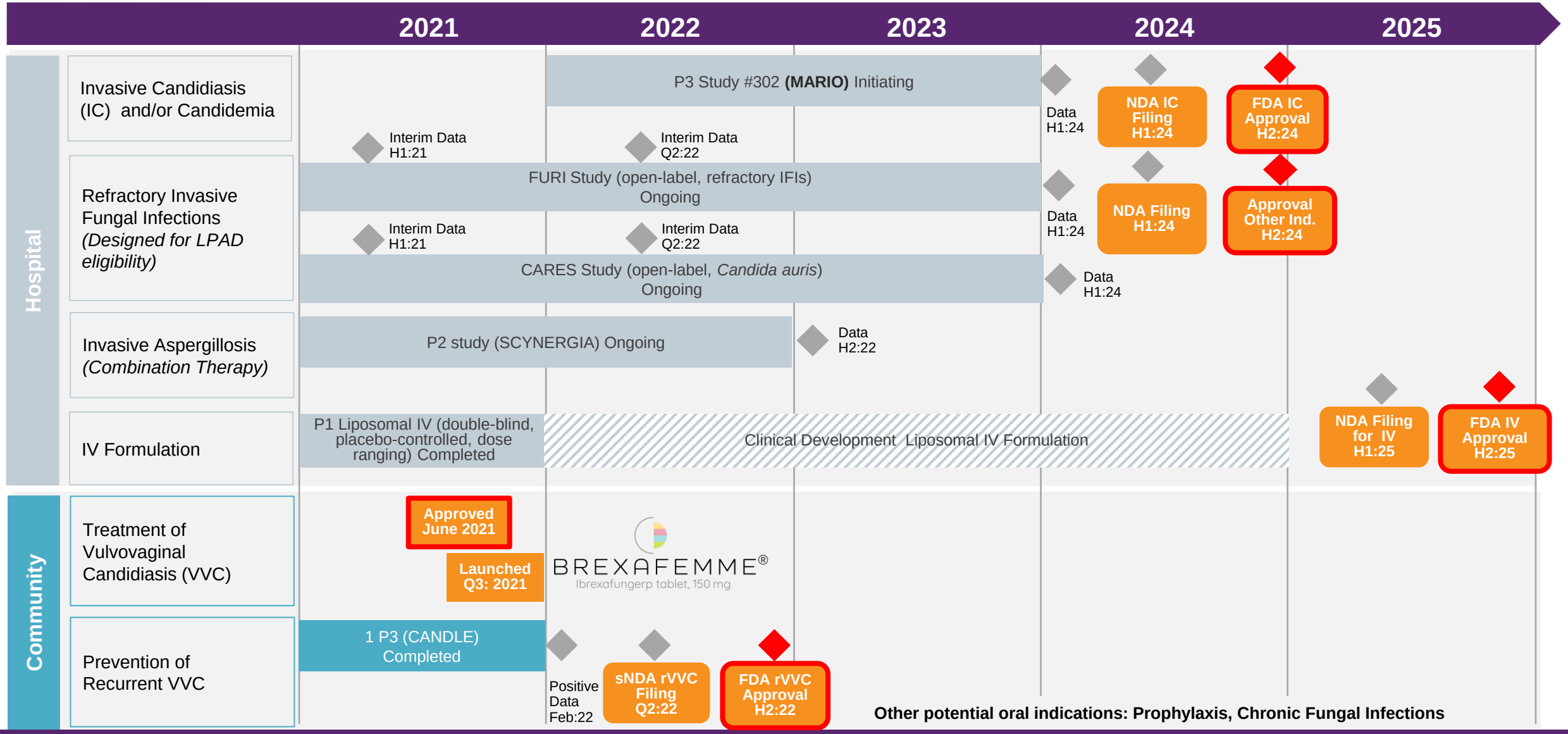
Global Response	Aggregate FURI+ CARES n= 131		FURI n=113 (86%)		CARES n=18 (14%)
Complete, Partial Response or Clinical Improvement [a]	**80 (61.1%)**		**66 (58.4%)**		**14 (77.8%)**
Stable Disease	**29 (22.1%)**	=	**27 (23.9%)**	+	**2 (11.1%)**
Total	**109 (83.2%)**		**93 (82.3%)**		**16 (88.9%)**
No Response [b]	15 (11.5%)		14 (12.4%)		1 (5.6%)
Unable to Determine	7 (5.3%)		6 (5.3%)		1 (5.6%)

a. Clinical Improvement (vaginal signs and symptoms not greater than 1) is the response defining success for VVC.
b. Includes progression of disease, deaths while on therapy and VVC cases not achieving clinical improvement.

The most common pathogens were *Candida glabrata* (34%), *C.albicans* (34%), *C.auris* (14%), *C.krusei* (7%), and *Aspergillus* spp. (8%)

Ibrexafungerp Hospital & Community Clinical Programs

Exclusivity until 2035 with a stream of potential approvals in several indications



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Larry Hoffman

Interim Chief Financial Officer

Financial Update

2022 Q1 Financial Summary

Item	Q1 2022	Q1 2021	Highlights/Comments
Net Product Revenue	$0.7	$0.0	Net product revenue does not include Hansoh licensing agreement
R&D Expenses	$5.7	$6.9	Completion of trials related to the approval of BREXAFEMME
SG&A Expenses	$14.6	$6.7	Commercial launch in Q3 2021
Net Loss	($5.5)	($4.7)	Recorded non-cash income related to warrant expirations and stock price

$ Millions

Cash Balance is Strong

Cash and cash equivalents of $95.2 million as of March 31, 2021, $45 million in gross proceeds ($42 million net) received from our common stock offering in April 2022.

Cash runway into Q1 2024

Eligible to receive up to $112 million in future long-term development and commercial milestones, plus low double-digit royalties on net product sales from partner Hansoh Pharma in Greater China

Potential for additional ex-U.S. business development opportunities

Key Takeaways/Conclusion

- Ibrexafungerp is a **unique systemic antifungal** with great potential in both community and hospital settings
- **Treatment of VVC is the first of multiple potential indications** for ibrexafungerp. The next one is the prevention of recurrent VVC with anticipated FDA approval at the end of 2022
- Potential approval for **first hospital indication is expected at the end of 2024** as an oral step-down therapy for invasive candidiasis
- With **exclusivity protection until 2035**, ibrexafungerp is expected to become a significant, **long-lasting antifungal franchise** with potential combined peak sales of $700M to $800M (Community + Hospital indications)
- Funds and resources to market BREXAFEMME, continue the hospital clinical development program and advance label expansion, with a cash runway into Q1 2024

Q&A