A dynamic force in the fight against infectious disease

Corporate Presentation
Forward-Looking Statement

Certain statements regarding SCYNEXIS, Inc. (the “Company”) made in this presentation constitute forward-looking statements, including, but not limited to, statements regarding our business strategies and goals, plans and prospects, market size, adoption rate, potential revenue, clinical validity and utility, growth opportunities, future products and product pipeline. Forward-looking statements are subject to risks and uncertainties that could cause actual results to differ materially from our expectations. These risks and uncertainties include, but are not limited to: BREXAFEMME may not be accepted by physicians and patients at the rate SCYNEXIS expects; risks inherent in SCYNEXIS’ ability to successfully develop and obtain FDA approval for ibrexafungerp for additional indications; unexpected delays may occur in the timing of acceptance by the FDA of an NDA submission; the expected costs of commercializing BREXAFEMME or of clinical studies and when they might begin or be concluded; SCYNEXIS’ need for additional capital resources; and SCYNEXIS’ reliance on third parties to conduct SCYNEXIS’ clinical studies and commercialize its products. The use of words such as “anticipates,” “expects,” “intends,” “plans,” “could,” “should,” “would,” “may,” “will,” “believes,” “estimates,” “potential,” or “continue” and variations or similar expressions are intended to identify forward-looking statements, but not all forward-looking statements may be so identified. These statements are based upon the current expectations and beliefs of management and are subject to certain risks and uncertainties that could cause actual results to differ materially from those described in the forward-looking statements. These risks and uncertainties include, but are not limited to, risks and uncertainties discussed in the Company’s most recent reports filed with the Securities and Exchange Commission (“SEC”), including under the caption “Risk Factors” in the Company’s annual report on Form 10-K for the year ended December 31, 2022, and in the Company’s subsequent quarterly reports on Form 10-Q, which factors are incorporated herein by reference. Readers are cautioned not to place undue reliance on any of these forward-looking statements. The Company undertakes no obligation to update any of these forward-looking statements to reflect events or circumstances after the date of this presentation, or to reflect actual outcomes.
Limited Antifungal Development Coupled With Escalating Resistance Has Resulted in Substantial Public Health Burden

SCYNEXIS aims to address antimicrobial resistance (AMR) by bringing a ground-breaking class of drugs with the strength, safety and versatility to defeat even the most insidious fungal diseases.

Emergence of Resistant Fungi

- **Polyenes** (amphotericin B)
- **Azoles** (Diflucan, Vfend)
- **Echinocandins** (Cancidas, Mycamine)
- **Fungersps** (BREXAFEMME)

Increase in vulnerable population (immunocompromised, transplant, long ICU stays, oncology Tx)

Increase in other resistant fungi (e.g., Aspergillus, Mucorales)
Fungal Resistance a Growing, Global, Public Health Threat

Antifungal development is a well-recognized priority

WHO Releases First-Ever List of Priority Deadly Fungal Pathogens

Fungal Outbreaks Increasing

CDC Identifies Drug Resistant Candida spp. and C. auris as Serious and Urgent Threats

BARDA New Priority: Antifungals

PASTEUR Act renews focus on antimicrobial resistance
Investor Highlights

Leveraging our anti-fungal expertise and near-term GSK milestones to develop differentiated therapies

Leader in the antifungal space with proven track record of successful clinical development, regulatory interactions and partnering

Validated platform of antifungals “fungerps” addressing recognized Global Health Threats

- Ibrexafungerp approved in VVC and RVVC and in Phase 3 of development for invasive fungal diseases
- Second-generation fungerp (SCY-247) in development focused on pathogens posing an antifungal-resistant threat

Strong Balance Sheet with cash runway > 2 years

VVC=vulvovaginal candidiasis; RVVC=recurrent vulvovaginal candidiasis
Opportunities to Grow Shareholder Value

Advancing proprietary platform of triterpenoid fungerps while evaluating next generation innovations

Maximize *Ibrexafungerp* opportunity

- Partnership with GSK optimizes BREXAFEMME commercial potential in VVC and RVVC
- SCYX continued execution of development activities to ensure full value potential is realized

Advance *next generation* fungerp

- SCY-247 in invasive fungal infections with critical needs
  - Leverages core internal expertise
  - Addresses recognized unmet needs with significant market potential

Strengthened balance sheet enhances the opportunity to deliver *additional innovative therapies* to patients with significant unmet need
Licensing Agreement is Transformational for SCYNEXIS

Total deal value of $593 million plus royalties

$90 Million up-front payment May 2023 (resulting in cash runway of greater than 2 years)

$260.5 million development, regulatory and first sale milestones

$242.5 million sales milestones from BREXAFEMME and other ibrexafungerp indications

$75.5 million in development milestones tied to the progression and success of MARIO study

$70 million in regulatory approval milestones

$115 million in commercial milestones based on first commercial sale in invasive candidiasis – U.S./E.U.

$77.5 million to be paid at multiple thresholds up through $200 million

$65 million to be paid at multiple thresholds between $300 million and $500 million

$50 million to be paid at each threshold of $750 million and $1 billion

Royalties based on cumulative annual net sales in the mid-single digit to mid-teen range
FURI/CARES Outcomes Provide Confidence in Ongoing MARIO Trial

Overall positive outcomes reported to date in IC population in FURI and CARES trials

### MARIO Trial Design
**Non-Inferiority**

- **IV ECHINOCANDIN**
  - ~3-7 Days Enrollment:
    - No vasopressors
    - Able to take oral medications
    - *Candida* spp. is known
    - Clinically stable

- **All Blinded**
  - (Investigator, Patient, DRC)
  - **ORAL FLUCONAZOLE**
  - **ORAL IBREXAFUNGERP**

- **End of treatment**
- **Primary Endpoint**
- **6-week follow-up**

### ENDPOINTS

- **Primary:**
  - All-cause mortality at Day 30

- **Secondary:**
  - Global response at Day 14

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**Overall positive outcomes reported to date in IC population in FURI and CARES trials**

<table>
<thead>
<tr>
<th></th>
<th>FURI¹ (N=56)</th>
<th>CARES² (N=18)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete/Partial Response</td>
<td>32 (63%)</td>
<td>14 (78%)</td>
</tr>
<tr>
<td>Stable Disease</td>
<td>13 (23%)</td>
<td>2 (11%)</td>
</tr>
<tr>
<td>Progression of Disease</td>
<td>4 (7%)</td>
<td></td>
</tr>
<tr>
<td>Indeterminate</td>
<td>4 (7%)</td>
<td>1 (6%)</td>
</tr>
<tr>
<td>Death (within 30 days post treatment)</td>
<td>3*</td>
<td>1*</td>
</tr>
</tbody>
</table>

*Deaths unrelated to fungal disease

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1. Cornely, OA, et al., ECCMID 2022
2. Prattes, J, et al., IDWeek 2022
Fungerps are Well-Suited to Address High Priority Fungal Pathogens

Demonstrated activity vs. fungi in both critical and high priority WHO Fungal Priority Pathogens list

<table>
<thead>
<tr>
<th>Critical Priority Group</th>
<th>High Priority Group</th>
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<tbody>
<tr>
<td>Cryptococcus neoformans</td>
<td>Cryptococcus neoformans</td>
</tr>
<tr>
<td>Aspergillus fumigatus</td>
<td>Aspergillus fumigatus</td>
</tr>
<tr>
<td>Candida auris</td>
<td>Candida auris</td>
</tr>
<tr>
<td>Candida albicans</td>
<td>Candida albicans</td>
</tr>
<tr>
<td>Nakaseomyces glabrata</td>
<td>Nakaseomyces glabrata</td>
</tr>
<tr>
<td>(Candida glabrata)</td>
<td>(Candida glabrata)</td>
</tr>
<tr>
<td>Eumycetoma causative agents</td>
<td>Eumycetoma causative agents</td>
</tr>
<tr>
<td>Fusarium spp.</td>
<td>Fusarium spp.</td>
</tr>
<tr>
<td>Candida parapsilosis</td>
<td>Candida parapsilosis</td>
</tr>
<tr>
<td>Histoplasma spp.</td>
<td>Histoplasma spp.</td>
</tr>
<tr>
<td>Mucorales</td>
<td>Mucorales</td>
</tr>
<tr>
<td>Candida tropicalis</td>
<td>Candida tropicalis</td>
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</tbody>
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SCY-247 (IV and oral):
Significant opportunity based on broad spectrum activity and fungerp-like tolerability

Ibrexafungerp:
GSK estimated opportunity as >$500M based on broad coverage of key pathogens

<table>
<thead>
<tr>
<th>Fungerp</th>
<th>Echinocandin</th>
<th>Azole</th>
<th>Polyene</th>
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</thead>
<tbody>
<tr>
<td>Companies</td>
<td>SCYNEKIS</td>
<td>GSK (Ibrexafungerp)</td>
<td>Pfizer</td>
</tr>
<tr>
<td>Peak Sales per Product</td>
<td>&gt; $500M (potential)</td>
<td>~$370M to $680M</td>
<td>~$720M to &gt;$1B</td>
</tr>
</tbody>
</table>

2. GSK press briefing on SCYNEKIS/BREXAFEMME March 30, 2023
3. Based on company filings and Symphony data (US)
### Fungerp Pipeline

**A new class of antifungal. Powerful. Different**

<table>
<thead>
<tr>
<th></th>
<th>Preclinical</th>
<th>Phase 1</th>
<th>Phase 2</th>
<th>Phase 3</th>
<th>Approval</th>
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<tbody>
<tr>
<td><strong>SCY-247</strong></td>
<td></td>
<td><strong>IV &amp; Oral</strong></td>
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<tr>
<td><em>Candida auris infections</em></td>
<td>IV &amp; Oral</td>
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<tr>
<td>Other Resistant Fungal Infections</td>
<td><strong>IV &amp; Oral</strong></td>
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<tr>
<td><strong>IBREXAFUNGERP</strong></td>
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<td>VVC and Recurrent VVC</td>
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<td><strong>GSK</strong></td>
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<tr>
<td>Invasive Fungal Infections</td>
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<td><strong>GSK</strong></td>
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*Partially Supported by NIH*
Invasive Fungal Diseases, Life-Threatening Infections

Growing concern for antimicrobial resistance

- All cause mortality ranging from 20-50%
- Limited treatment options: echinocandins, azoles (only oral option), and amphotericin B

Significant number of patients not well-served with current treatment options – Examples:

**35yo with lung transplant**, immunosuppressed due to chemotherapy, kidney failure, lung lesions with respiratory distress and positive test for *Aspergillus spp.*

- Initiates Tx with voriconazole but disease progresses, and amphotericin B is not optimal option due to kidney toxicity.

**18yo in ICU post kidney transplant** with multiple catheters, persistent fever not responding to antibiotics. *Candida auris* isolated in blood.

- Initiates Tx with IV echinocandin (5-7 days).
- Responded well and oral step-down is desirable but *Candida auris* is azole-resistant.

**45yo in the ICU with acute leukemia**, progressive respiratory distress. Lung biopsy reveals infection due to Mucorales.

- Initiates Tx with Isavuconazole (7-10 days), but sub-optimal response. Combination therapy with a glucan synthase inhibitor is considered.

Antifungal treatment required for 6-12 weeks. Antifungal treatment required for 3-4 weeks. Antifungal treatment required for 6-12 weeks.
SCY-247: 
Next Generation Fungerp
SCY-247 – Our Next Generation Fungerp

**BROAD SPECTRUM OF ACTIVITY**

- Fungicidal against *Candida* spp.
  - Including *Candida auris* and other echinocandin-resistant *Candida* spp.
- Active against MDR pathogens
  - Including azole-resistant *Aspergillus* spp.
- Other fungal pathogens
  - Yeasts, molds, *Pneumocystis* and dimorphic fungi

**VALIDATED MOA**

- Glucan synthase inhibitor
  - Glucan synthase not found in human cells
- Echinocandin MOA
  - Same MOA as echinocandins, with differentiated binding
  - Active against most echinocandin-resistant *Candida* strains

**FAVORABLE PK PROFILE**

- Suitable for IV and oral formulations
- Low propensity for DDIs
- Tissue penetration
  - Distributes into tissues often affected by fungal infections
SCY-247 – In Development Against Resistant Fungal Infections

- Anticipated Qualified Infectious Disease Product (QIDP) designation, Orphan Designation and Fast Track (regulatory exclusivity of at least 10 years)

- IP wholly owned by SCYNEXIS
  GSK has right of first negotiation

- Development backed by NIH
  NIH provided ~$3M funding to Case Western University for development of SCY-247 against C. auris

- IND-enabling studies in progress
  IND filing anticipated in 2024
Leadership Team in Place to Execute our Vision

Leadership has proven track record of successful new drug development and partnership

David Angulo, M.D.
President and Chief Executive Officer

Ivor Macleod
Chief Financial Officer

Scott Sukenick
Chief Legal Officer

Schering-Plough
Stiefel
BrickellBio
Simpson Thacher
Cooley
Roche
Eisai
MERCK
Athersys Inc.
SCYNEXIS Strongly Positioned for Value Creation

- Category leader in the fight against deadly fungal pathogens with new antifungal (SCY-247) in development

- Global urgency to rapidly develop potent antifungals to treat emerging infectious threats

- Demonstrated internal expertise, solid supply chain and long IP protection, and potential for next generation products and partnerships

- Strong Balance Sheet with cash runway of more than 2 years