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

FORM 8-K

CURRENT REPORT
Pursuant to Section 13 or 15(d)
of the Securities Exchange Act of 1934

Date of Report (Date of earliest event reported):
August 11, 2021

Reneo Pharmaceuticals, Inc.
(Exact name of registrant as specified in its charter)

Delaware	**001-40315**	**47-2309515**
(State or other jurisdiction of incorporation)	**(Commission File Number)**	**(I.R.S. Employer Identification No.)**

18575 Jamboree Road, Suite 275-S, Irvine, California	**92612**
(Address of principal executive offices)	**(Zip Code)**

Registrant's telephone number, including area code: (858) 283-0280

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions:

☐ Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)

☐ Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)

☐ Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))

☐ Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))

Securities registered pursuant to Section 12(b) of the Act:

Title of each class	Trading Symbol(s)	Name of each exchange on which registered
Common stock, par value $0.0001 per share	RPHM	The Nasdaq Stock Market LLC

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (§ 230.405 of this chapter) or Rule 12b–2 of the Securities Exchange Act of 1934 (§ 240.12b–2 of this chapter).

Emerging growth company ☒

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act. ☐

Item 7.01 Regulation FD Disclosure.

On August 11, 2021, Reneo Pharmaceuticals, Inc. (the "Company") updated its corporate slide presentation for use in meetings with investors, analysts and others. The presentation is available through the Company's website and a copy is attached as Exhibit 99.1 to this Current Report on Form 8-K.

The information in this Item 7.01 of this Current Report on 8-K (including Exhibit 99.1) is furnished and shall not be deemed "filed" for purposes of Section 18 of the Securities Exchange Act of 1934, as amended, or subject to the liabilities of that section or Sections 11 and 12(a)(2) of the Securities Act of 1933, as amended. The information shall not be deemed incorporated by reference into any other filing with the Securities and Exchange Commission made by the Company, whether made before or after today's date, regardless of any general incorporation language in such filing, except as shall be expressly set forth by specific references in such filing.

Item 9.01 Financial Statements and Exhibits.

(d) Exhibits.

Exhibit No.	Description
99.1	Corporate Slide Presentation, dated August 11, 2021.
104	Cover Page Interactive Data File (embedded within the Inline XBRL document).

SIGNATURES

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

Reneo Pharmaceuticals, Inc.

Date: August 11, 2021

By: /s/ Gregory J. Flesher
Gregory J. Flesher
Chief Executive Officer

Focused on Improving the Lives of Patients with Rare Genetic Mitochondrial Diseases

Forward-Looking Statements

This presentation may not be reproduced, retransmitted or further distributed to any other person or published, in whole or in part, for any other purpose. This presentation regarding Reneo Pharmaceuticals, Inc. (the "Company") is for you to familiarize yourself with the Company. This presentation is for information and education purposes only. No reliance may be placed for any purpose whatsoever on the information contained in this document or on assumptions made as to its completeness. This presentation contains forward-looking statements that are based on the beliefs and assumptions of the Company's management team, and on information currently available to such management team. These forward-looking statements are subject to numerous risks and uncertainties, many of which are beyond the Company's control. All statements, other than statements of historical fact, contained in this presentation, including statements regarding future events, future financial performance, business strategy and plans, and objectives of the Company for future operations, are forward-looking statements. Although the Company does not make forward-looking statements unless it believes it has a reasonable basis for doing so, the Company cannot guarantee their accuracy. These statements are only predictions and involve known and unknown risks, uncertainties and other factors, which may cause the actual results, levels of activity, performance or achievements of the Company and the Company's industry to be materially different from any future results, levels of activity, performance or achievements expressed or implied by these forward-looking statements. You should not place undue reliance on any forward-looking statement. The Company undertakes no obligation to update or revise publicly any of the forward-looking statements after the date hereof to conform the statements to actual results or changed expectations except as required by law.

This presentation also contains estimates and other statistical data made by independent parties and by us relating to market size and growth and other data about our industry. This data involves a number of assumptions and limitations, and you are cautioned not to give undue weight to such estimates. In addition, projections, assumptions, and estimates of our future performance and the future performance of the markets in which we operate are necessarily subject to a high degree of uncertainty and risk. These and other factors could cause results to differ materially from those expressed in the estimates made by the independent parties and by us.

This presentation discusses a product candidate that is under clinical study and which has not yet been approved for marketing by the U.S. Food and Drug Administration. No representation is made as to the safety or effectiveness of this product candidate for the use for which it is being studied.

Investment Highlights

Novel Product Candidate

- Preliminary efficacy and tolerability observed in clinical trials
- Favorable guidance from U.S. and European regulatory agencies

Significant Unmet Need

- Myopathy with limitations in physical activity and reduced life expectancy
- No approved treatment options for most patients

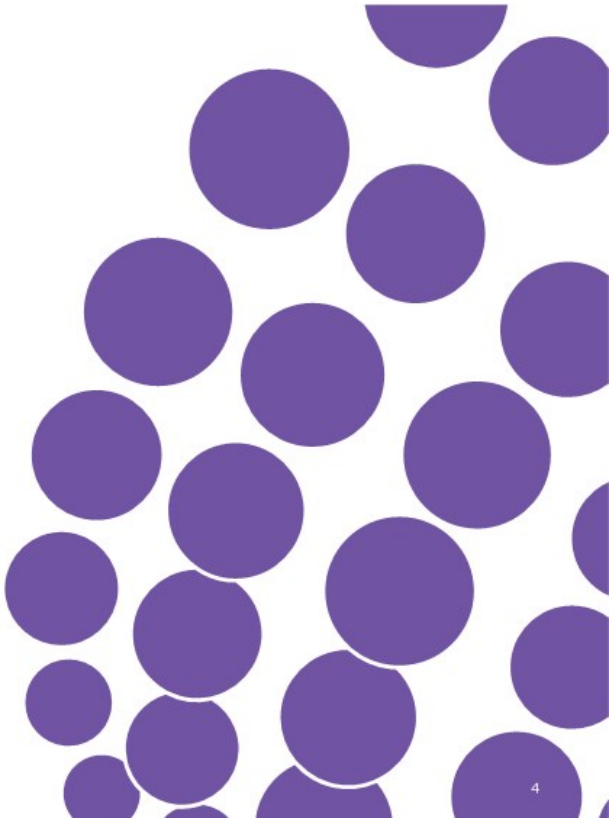
Clinical Milestones

- Ongoing clinical trials in three rare mitochondrial diseases
- Data from clinical trials anticipated in 2022 and 2023

Secure Cash Position

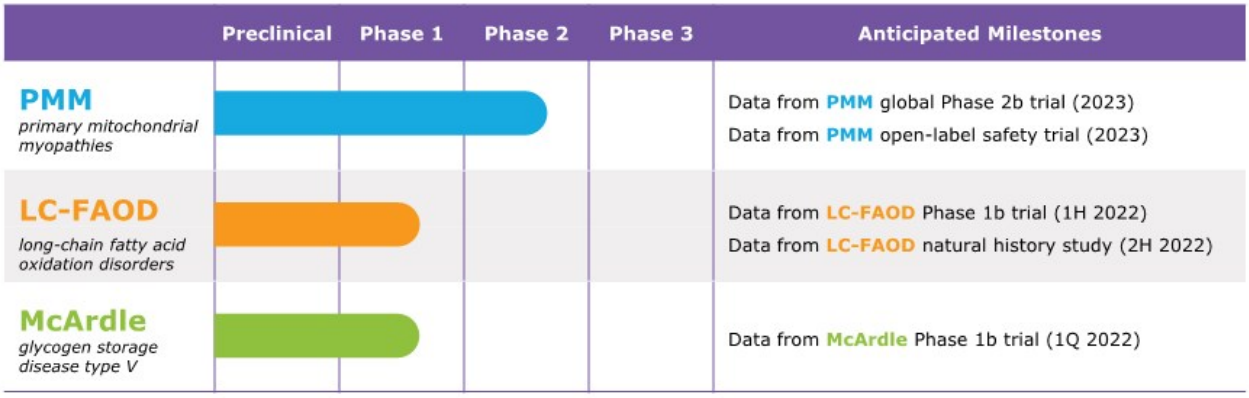
- $167 million in cash, cash equivalents, and short-term investments as of June 30, 2021
- Anticipated runway through the end of 2023

REN001 Overview

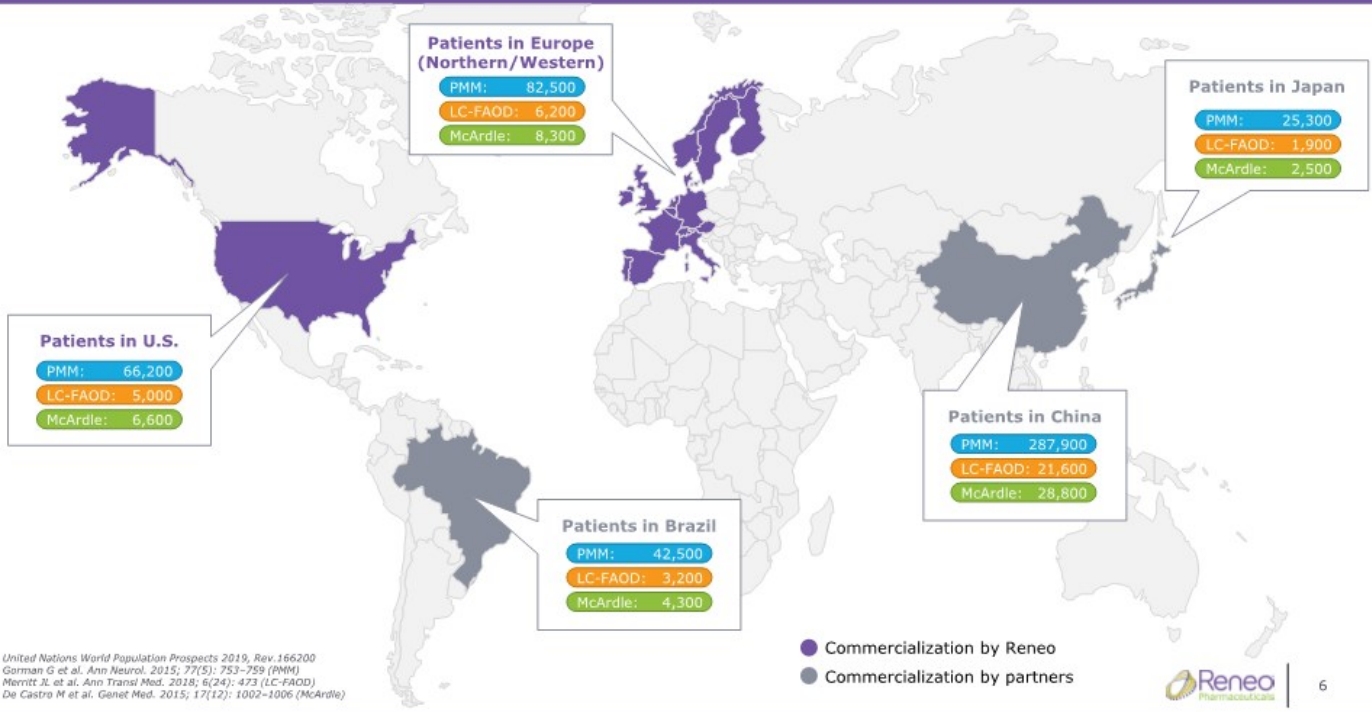


REN001 Addresses Many Forms of Mitochondrial Disease

Reneo is initially developing REN001 for patients with three rare genetic mitochondrial diseases that typically present with myopathy and have high unmet medical needs



Significant Opportunity in Key Pharmaceutical Markets

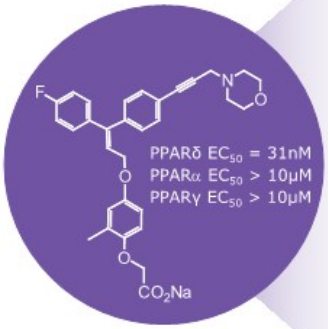


- *United Nations World Population Prospects 2019, Rev.166200*
- *Gorman G et al. Ann Neurol. 2015; 77(5): 753–759 (PMM)*
- *Merritt JL et al. Ann Transl Med. 2018; 6(24): 473 (LC-FAOD)*
- *De Castro M et al. Genet Med. 2015; 17(12): 1002–1006 (McArdle)*

REN001: Selective PPARδ Agonist

PPAR Delta (δ)

- Member of PPAR family that regulates cellular energy generation
- Present in multiple tissues including muscle, kidney, brain, and liver
- Activation in muscle stimulated by increased cellular need for energy



1. Increases transcription of genes central to mitochondrial function

2. Drives production of new mitochondria

3. Increases oxidation of fatty acids and cellular energy production

Sources:

Leg Immobilization Study Overview

Randomized, placebo-controlled clinical trial in healthy adult subjects to assess muscle strength

Primary Objective:

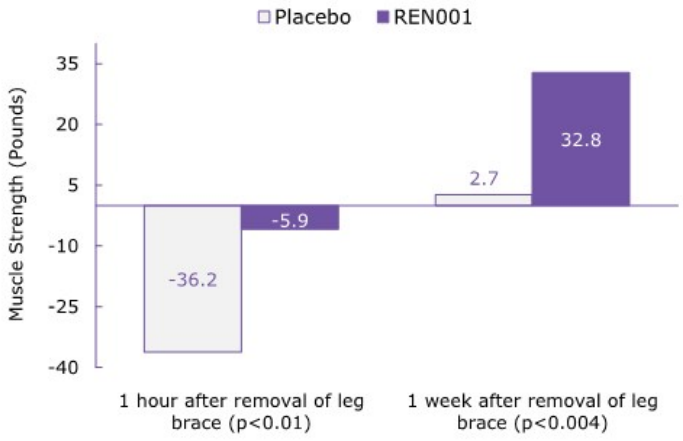
Evaluate safety and tolerability of 28 days of REN001 in healthy volunteers

Secondary Objectives:

Characterize changes in muscle strength, muscle size, and expression of PPARδ regulated genes known to be involved in mitochondrial function and mitochondrial biogenesis

REN001 Treatment Increased Muscle Strength vs. Placebo

Mean change from baseline in muscle strength

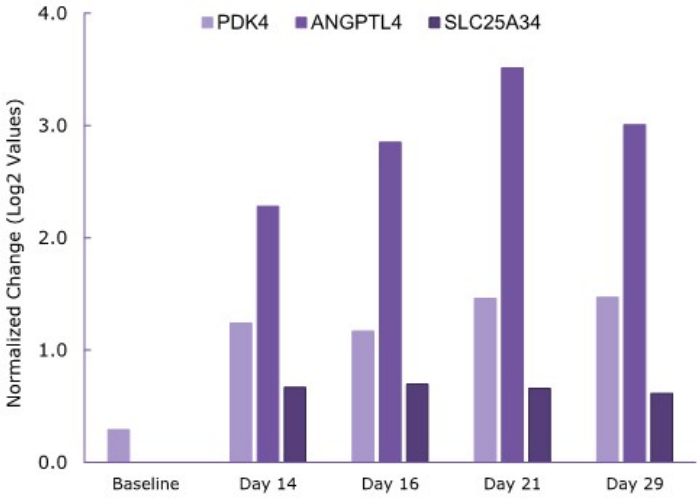


(p-value from a mixed model with baseline value as covariate)

- No serious adverse events (SAEs) related to REN001
- Treatment emergent adverse events (TEAEs) were similar among subjects who received REN001 or placebo
- REN001 treated subjects had substantially more leg strength than placebo-treated subjects
  - Greater preservation of muscle strength following immobilization
  - Greater increase in muscle strength one week after removal of the leg brace

Increases in PPARδ-regulated Gene Expression Observed

Expression of PPARδ-regulated genes from muscle biopsies



- REN001 treated subjects showed increases in expression of several PPARδ-regulated genes
  - Pyruvate dehydrogenase lipoamide kinase isozyme 4 (**PDK4**) encodes for a protein that plays a key role in regulation of glucose and fatty acid metabolism
  - Angiopoietin-like 4 (**ANGPTL4**) encodes for a protein that is directly involved in regulating lipid metabolism
  - Solute carrier family 25 member 34 (**SLC25A34**) encodes for a protein that is known to transport molecules across the mitochondrial membrane

Primary Mitochondrial Myopathies (PMM)

Characteristics

- PMMs are rare disorders caused by mutations within mitochondrial DNA (mtDNA) or nuclear DNA (nDNA)
- Mutations hamper the ability of mitochondria to generate energy
- Alterations most pronounced in tissues with high energy demand (muscle, brain, and heart)

Symptoms

- Debilitating fatigue
- Myopathy
- Exercise intolerance
- Muscle pain
- Severe lack of endurance

Prevalence

- Approximately 20:100,000*

Current Treatments

- No approved therapies
- Over-the-counter vitamins and supplements commonly used

Gorman G et al. Ann Neurol. 2015; 77(5): 753–759 (PMM)

PMM Phase 1b Clinical Trial

Open-label clinical trial in adult subjects with genetically confirmed mtDNA mutations and myopathy

Primary Objective:

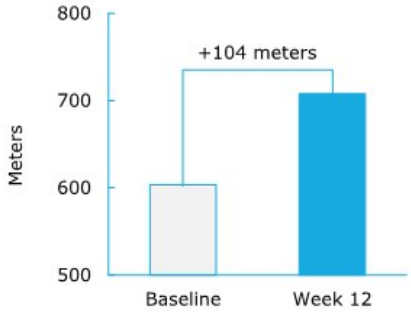
Evaluate safety and tolerability of 12 weeks of treatment with REN001 in patients with PMM

Secondary Objectives:

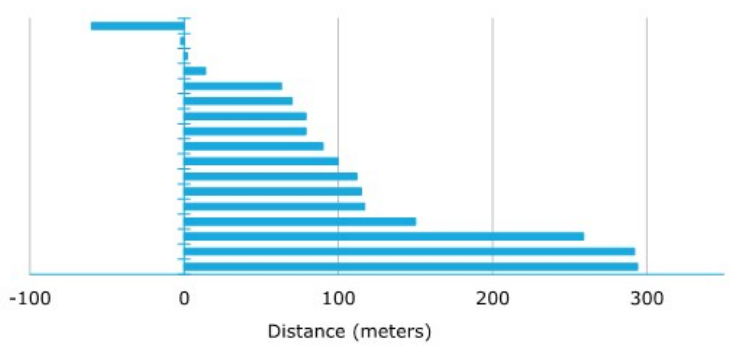
Evaluate safety and tolerability of 48 weeks of REN001 and explore changes in clinical outcome such as exercise tests, oxygen consumption, and symptoms after 12 weeks of treatment with REN001

PMM Phase 1b Results – Increases in 12MWT

Mean Change in 12MWT (n=17)

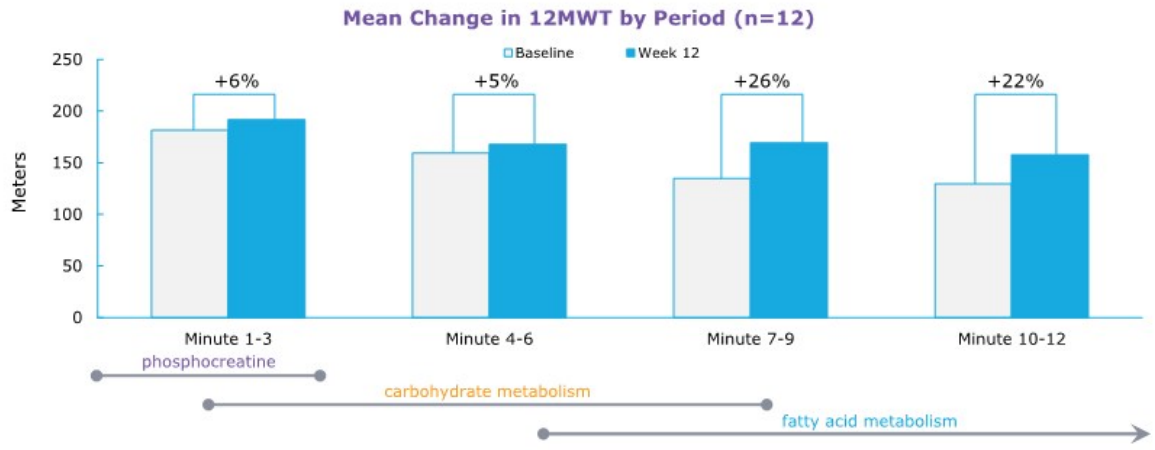


12MWT Change from Baseline by Subject (n=17)



- Following 12 weeks of 100 mg once-daily dosing with REN001, patients achieved an average increase of 104 meters in walk distance compared to baseline
- 15 of 17 (88%) had an increase in distance walked, with 13 of 17 (76%) increasing ≥60 meters

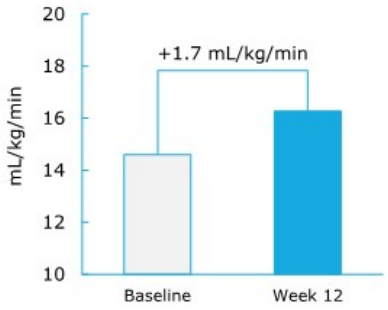
Time-Based Improvements in Walk Distance Over Baseline



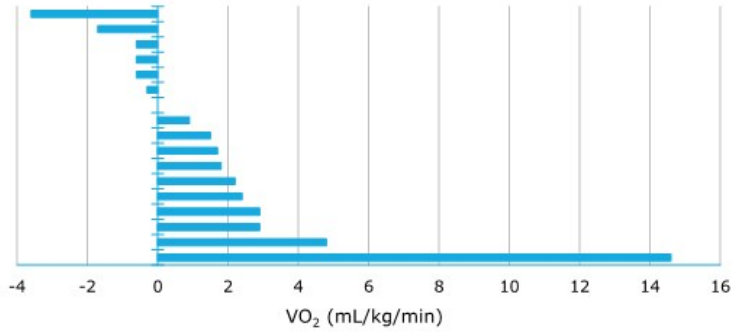
- Gains observed in distance walked were associated with improvements in gait mechanics
- Greatest increase over baseline occurred after the 6th minute, when fatty acid metabolism is expected to increase

Mean Improvements in Peak VO_2 Observed Over Baseline

Mean Change in Peak Oxygen Consumption (VO2) (n=17)



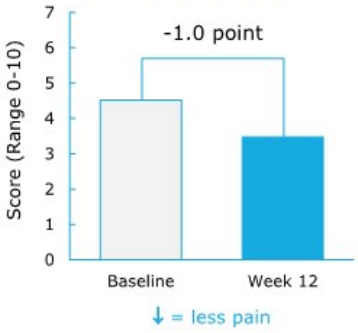
Peak O_2 Consumption (VO_2) Change from Baseline by Subject (n=17)



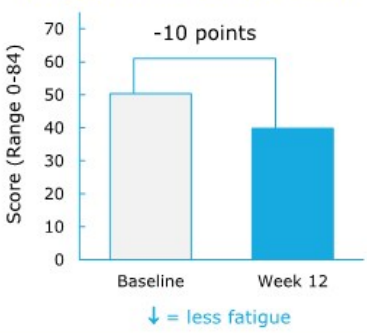
- Mean improvement in VO_2 of 1.7 mL/kg/min observed at week 12 compared to baseline
- No change in heart rate or perceived exertion

Patient-Reported Outcomes

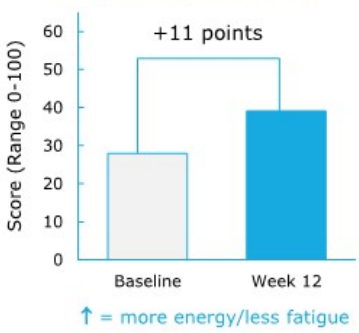
Mean Change in Brief Pain Inventory (n=14)



Mean Change in Modified Fatigue Impact Scale (n=17)



Mean Change in SF-36 Energy/Fatigue (n=17)



Patients treated with REN001 for 12 weeks reported fewer symptoms compared to baseline

- Reduction in pain (mean BPI score from 4.5 at baseline to 3.5)
- Reduction in fatigue (mean MFIS score from 50 at baseline to 40)
- Improvement in the SF-36 energy/fatigue score (mean score from 28 at baseline to 39)

Summary of Leg Immobilization and Phase 1b Trials

Leg Immobilization Study

- Observed increases in the expression of PPARδ-driven genes compared to placebo
- Statistically significant, placebo-corrected improvements in strength compared to placebo
- No treatment-related serious adverse events reported

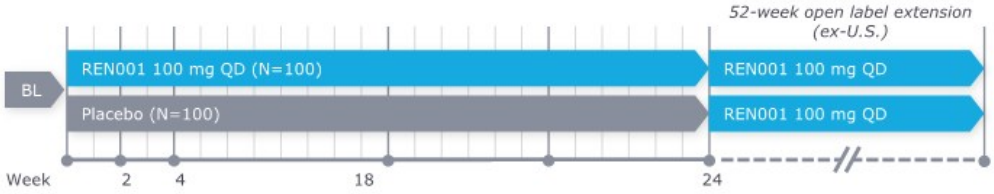
Phase 1b in Patients with PMM

- On average, patients experienced an increase of 104m in the 12MWT
- On average, patients experienced increases in VO_2 max
- Changes in in VO_2 max were consistent with the observed increases in 12MWT
- Substantial reductions in patient-reported pain and fatigue
- No treatment-related serious adverse events reported

STRIDE: Global Phase 2b Clinical Trial in PMM

RDBPC clinical trial in patients with PMM caused by mutations in mtDNA

Enrollment in STRIDE began in July 2021 and topline data is expected in 2023



Primary Objective:

Change from baseline to week 24 in distance walked during 12MWT

Secondary Objectives:

Changes from baseline to week 24 in MFIS physical sub-scale and PGIC score

Other Assessments:

30 second sit to stand test, step count, PGIS score, SF-36, MFIS total, cognitive and psychosocial sub-scale, BPI severity and pain interference, and WPAI:SHP

Long-Chain Fatty Acid Oxidation Disorders (LC-FAOD)

Characteristics

- LC-FAOD are inherited genetic errors of metabolism resulting in the inability to use dietary long-chain fatty acids as energy sources
- Mutations in genes that code for enzymes that perform long-chain fatty acid oxidation

Symptoms

- Young children– lethargy, liver dysfunction, hypoglycemia, high risk for sudden death, cardiomyopathy
- Older patients – limited endurance, muscle aches, rhabdomyolysis

Prevalence

- Estimated 1.5:100,000*

Current Treatments

- DOLJOVI®, a fatty acid supplement similar to medium chain triglyceride oil (MCT)
- Therapy includes a fat-restricted diet, supplementing with short or medium chain fatty acids

Merritt JL et al. Ann Transl Med. 2018; 6(24): 473 (LC-FAOD)

LC-FAOD Phase 1b Clinical Trial

Description

Open-label clinical trial in adult subjects with LC-FAOD and CPT2, VLCAD, LCHAD, or TFP mutations

Primary Objective:

Evaluate safety and tolerability of 12 weeks of REN001 in subjects with LC-FAOD

Secondary Objectives:

Exploration of changes in clinical outcomes such as 12MWT

Changes in symptoms including SF-36 scale, PGI-S, CGI-S, MFIS, BPI, FAOD-MSI, PGI-C

Improved 12MWT, Reduced Symptoms Observed

Mean Change from Baseline to Week 12					
Patient	12MWT (meters)	MFIS	BPI	SF-36 Physical Functioning	SF-36 Energy/ Fatigue
1	-82	-5	0	10	5
2	3	16	0.75	-15	-15
3	58	2	0	5	-5
4	61	-9	-0.5	10	20
5	74	-10	-1.5	5	40
6	120	-8	-0.75	10	25

- Preliminary Results After 12 weeks of treatment with REN001
  - *5 of 6 subjects (83%) showed an improvement in the 12MWT*
  - *4 of 6 subjects (67%) showing an improvement of 50 meters or greater*
- Reduction in symptoms, including fatigue (MFIS) and pain (BPI)
- Improvements in SF-36 physical functioning and energy/fatigue domains

McArdle Disease

Characteristics

- Rare genetic disorder belonging to a class known as glycogen storage diseases (GSD)
- Mutation in gene that encodes for myophosphorylase, a muscle-specific enzyme that breaks down glycogen stored in the muscles
- Patients have a debilitating lapse in energy production after a short period of physical exertion

Symptoms

- Acute muscle pain, severe fatigue, elevated heart rate
- Can result in severe rhabdomyolysis, leading to hospitalization/acute kidney failure

Prevalence

- Approximately 2:100,000*

Current Treatments

- None

**De Castro M et al. Genet Med. 2015; 17(12): 1002–1006 (McArdle)*

McArdle Disease Phase 1b Clinical Trial

Description

- Open-label clinical trial in adult subjects with McArdle Disease

Primary Objective:

- Evaluate safety and tolerability of 12-weeks of REN001 in subjects with McArdle disease

Secondary Objectives:

- Exploration of changes in clinical outcomes such 12MSWT
- Changes in symptoms including SF-36 scale, PGIS-S, PGIS-I, PGIS-C, MFIS, and WPAI

Patents and Exclusivity

Patents & Exclusivity

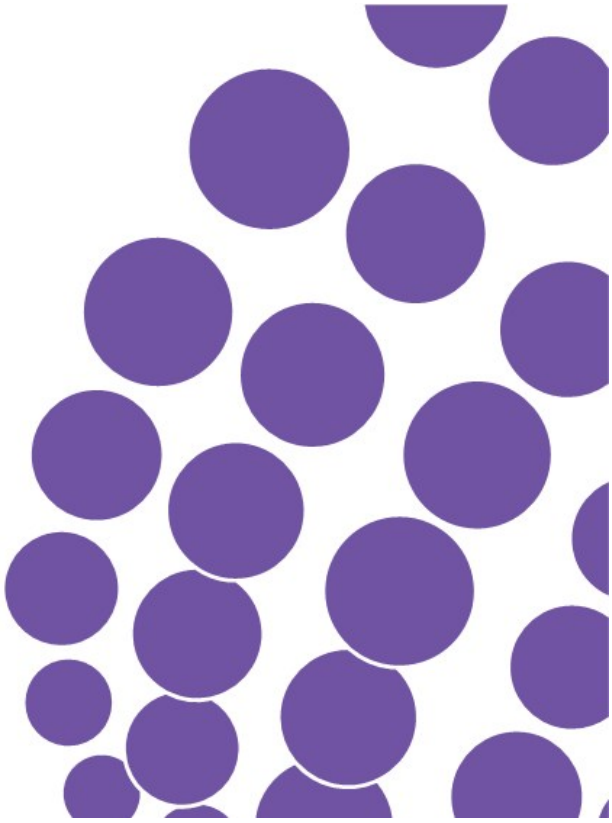
REN001 patent portfolio

- 6 U.S. and 19 foreign issued patents covering **composition of matter** of REN001 *(expiry in 2026)*
- 3 U.S. and 5 foreign issued patents, plus 1 U.S. and 2 foreign pending applications covering **methods of use** *(expires 2034)*
- Pending patent applications covering **methods of use**, **methods of manufacturing**, and **crystalline forms (polymorphs)** *(expires 2040-2042, if issued)*

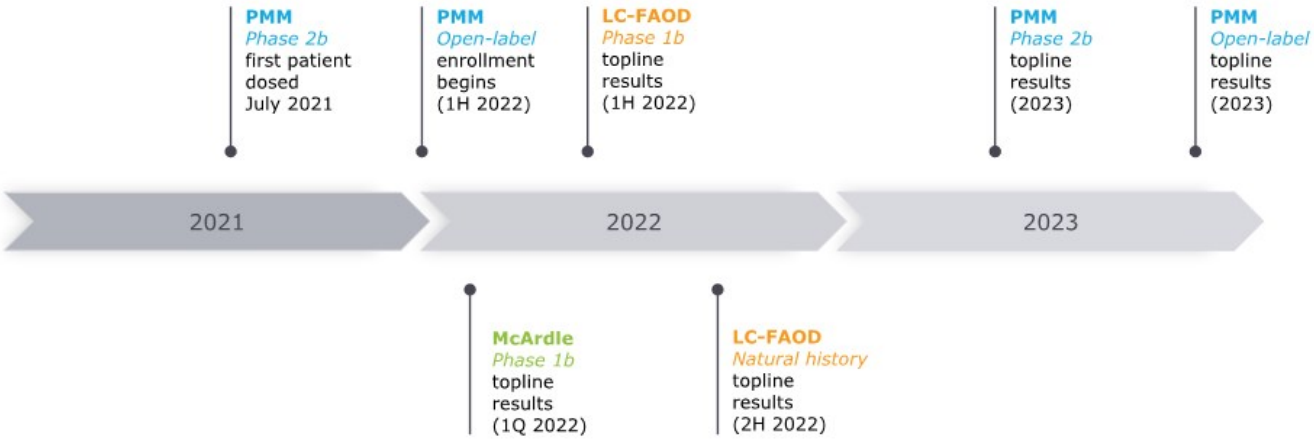
Anticipated market exclusivity

- 7 years for new orphan drug in the U.S. *(10 years in Europe and Japan)*
- 6 months additional exclusivity for pediatric populations

Clinical Milestones



REN001 Clinical Development Roadmap



To learn more, please contact:

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