

SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549

SCHEDULE 13G  
(Rule 13d-102)

INFORMATION TO BE INCLUDED IN STATEMENTS FILED PURSUANT  
TO RULES 13d-1(b), (c) AND (d) AND AMENDMENTS THERETO FILED  
PURSUANT TO RULE 13d-2(b)  
(Amendment No. )<sup>1</sup>

Homology Medicines, Inc.  
\_\_\_\_\_  
(Name of Issuer)

Common Stock, \$0.0001 par value per share  
\_\_\_\_\_  
(Title of Class of Securities)

438083107  
\_\_\_\_\_  
(CUSIP Number)

November 10, 2020  
\_\_\_\_\_  
(Date of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

☐ Rule 13d-1(b)

☒ Rule 13d-1(c)

☐ Rule 13d-1(d)

<sup>1</sup>The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter disclosures provided in a prior cover page. The information required on the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act.

1.	NAME OF REPORTING PERSON S.S. OR I.R.S. IDENTIFICATION NO. OF ABOVE PERSON (VOLUNTARY)  Pfizer Inc.		
2.	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP		(a) <input type="checkbox"/> (b) <input type="checkbox"/>
3.	SEC USE ONLY		
4.	CITIZENSHIP OR PLACE OF ORGANIZATION  Delaware		
NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH	5.	SOLE VOTING POWER 5,000,000	
	6.	SHARED VOTING POWER -0-	
	7.	SOLE DISPOSITIVE POWER 5,000,000	
	8.	SHARED DISPOSITIVE POWER -0-	
9.	AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON  5,000,000		
10.	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES <input type="checkbox"/>		
11.	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9)  9.9%*		
12.	TYPE OF REPORTING PERSON CO		

\*Based on 50,264,419 shares of common stock of the Issuer outstanding, which is equal to 45,264,419 shares of common stock outstanding as of November 2, 2020, as reported in the Issuer's Form 10-Q for the period ended September 30, 2020 filed with the Securities and Exchange Commission on November 9, 2020, plus 5,000,000 shares of common stock of the Issuer issued by the Issuer and acquired by the reporting person on November 10, 2020.

SCHEDULE 13G

- ITEM 1(a)      NAME OF ISSUER:
- Homology Medicines, Inc.
- ITEM 1(b)      ADDRESS OF ISSUER'S PRINCIPAL EXECUTIVE OFFICES:
- One Patriots Park, Bedford, Massachusetts 01730
- ITEM 2(a)      NAME OF PERSON FILING:
- Pfizer Inc.
- ITEM 2(b)      ADDRESS OF PRINCIPAL BUSINESS OFFICE:
- 235 East 42<sup>nd</sup> Street, New York, NY 10017
- ITEM 2(c)      CITIZENSHIP:
- Delaware
- ITEM 2(d)      TITLE OF CLASS OF SECURITIES:
- Common Stock, \$0.0001 par value per share
- ITEM 2(e)      CUSIP NUMBER:
- 438083107
- ITEM 3          STATEMENTS FILED PURSUANT TO RULES 13D-1(B) OR 13D-2(B) OR (C):
- Not applicable.

ITEM 4 OWNERSHIP:

The information requested in this item is incorporated herein by reference to the cover page to this Schedule 13G.

ITEM 5 OWNERSHIP OF FIVE PERCENT OR LESS OF A CLASS:

Not applicable.

ITEM 6 OWNERSHIP OF MORE THAN FIVE PERCENT ON BEHALF OF ANOTHER PERSON:

Not applicable.

ITEM 7 IDENTIFICATION AND CLASSIFICATION OF THE SUBSIDIARY WHICH ACQUIRED THE SECURITY BEING REPORTED ON BY THE PARENT COMPANY:

Not applicable.

ITEM 8 IDENTIFICATION AND CLASSIFICATION OF MEMBERS OF THE GROUP:

Not applicable.

ITEM 9 NOTICE OF DISSOLUTION OF GROUP:

Not applicable.

ITEM 10 CERTIFICATION:

By signing below the undersigned certifies that, to the best of the undersigned's knowledge and belief, the securities referred to above were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the Issuer and were not acquired and are not held in connection with or as a participant in any transaction having such purpose or effect.

SIGNATURE

After reasonable inquiry and to the best of the undersigned's knowledge and belief, the undersigned certifies that the information set forth in this statement is true, complete and correct.

Dated: November 19, 2020

PFIZER INC.

By: /s/ Susan Grant

Name: Susan Grant

Title: Assistant Secretary