

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL	
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>TLS Beta Pte. Ltd.</u> (Last) (First) (Middle) 60B ORCHARD ROAD #06-18 TOWER 2 THE ATRIUM@ORCHARD (Street) SINGAPORE U0 238891 (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 03/28/2018	3. Issuer Name and Ticker or Trading Symbol <u>Homology Medicines, Inc. [FIXX]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
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Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Series A Preferred Stock	(1)	(1)	Common Stock	1,605,681	(1)	I	See footnote ⁽²⁾
Series B Preferred Stock	(1)	(1)	Common Stock	989,612	(1)	I	See footnote ⁽²⁾

1. Name and Address of Reporting Person* <u>TLS Beta Pte. Ltd.</u> (Last) (First) (Middle) 60B ORCHARD ROAD #06-18 TOWER 2 THE ATRIUM@ORCHARD (Street) SINGAPORE U0 238891 (City) (State) (Zip)
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1. Name and Address of Reporting Person* <u>Temasek Life Sciences Private Ltd</u> (Last) (First) (Middle) 60B ORCHARD ROAD #06-18 TOWER 2, THE ATRIUM@ORCHARD (Street) SINGAPORE U0 238891 (City) (State) (Zip)
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1. Name and Address of Reporting Person* <u>Fullerton Management Pte Ltd</u> (Last) (First) (Middle) 60B ORCHARD ROAD #06-18 TOWER 2, THE ATRIUM@ORCHARD (Street) SINGAPORE U0 238891

(City)	(State)	(Zip)
1. Name and Address of Reporting Person*		
Temasek Holdings (Private) Ltd		
(Last)	(First)	(Middle)
60B ORCHARD ROAD #06-18		
TOWER 2, THE ATRIUM@ORCHARD		
(Street)		
SINGAPORE	U0	238891
238891		
(City)	(State)	(Zip)

Explanation of Responses:

1. The preferred stock is convertible into the Issuer's common stock on a one-for-one basis at the holder's election and has no expiration date. The preferred stock will automatically convert into common stock upon the closing of the Issuer's initial public offering.
2. The securities reported herein are held of record by TLS Beta Pte. Ltd, which is a direct wholly-owned subsidiary of Temasek Life Sciences Private Limited. Temasek Life Sciences Private Limited is a direct wholly-owned subsidiary of Fullerton Management Pte Ltd ("FMPL"), which in turn is a direct wholly-owned subsidiary of Temasek Holdings (Private) Limited. Temasek Life Sciences Private Limited, FMPL and Temasek Holdings (Private) Limited may therefore be deemed to have or share beneficial ownership of the securities held by TLS Beta Pte. Ltd.

Remarks:

[TLS Beta Pte. Ltd. By: /s/ Christina Choo, Director](#) [03/28/2018](#)
[Temasek Life Sciences Private Limited By: /s/ Lim Siew Lee Sherlyn, Director](#) [03/28/2018](#)
[Fullerton Management Pte Ltd By: /s/ Cheong Kok Tim, Director](#) [03/28/2018](#)
[Temasek Holdings \(Private\) Limited By: /s/ Christina Choo, Authorized Signatory](#) [03/28/2018](#)

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 5 (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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.