FORM 3

(State)

(Zip)

(City)

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0104 Estimated average burden hours per response: 0.5

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

					16(a) of the Securities Exchange the Investment Company Act of						
Baker Biotech Capital II (Z) (GP),			2. Date of Event Requiring Statement (Month/Day/Year) 03/24/2006		3. Issuer Name and Ticker or Trading Symbol IDERA PHARMACEUTICALS, INC. [ IDP ]						
					Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year) 03/28/2006			
(Last) 667 MADISO	(First) N AVE 17TH	(Middle) FLOOR			Officer (give title below)	Other (spe		6. In	dividual or Joir licable Line)	nt/Group Filing (Check	
(Street) NEW YORK	NV	10021							Person	by One Reporting	
(City)	(State)	(Zip)						X	Reporting F	Person	
(0.1)	(0.00.0)	(=- P)	Table I - No	n-Deriva	 tive Securities Beneficial	lv Owned		<u> </u>			
1. Title of Secur	ity (Instr. 4)				2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownersh Form: Direct or Indirect (Instr. 5)	ct (D)	4. Nat (Instr.		t Beneficial Ownershi	
Common Stoc	k <sup>(1)</sup>				674,120(3)	I		See F	ootnote <sup>(2)</sup>		
		(е			re Securities Beneficially ants, options, convertible		s)				
,			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr.		4. Conversion or		5. Ownership Form:	6. Nature of Indirect Beneficial Ownershi (Instr. 5)	
			Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Exerc Price Deriva Secur	of ative	Direct (D) or Indirect (I) (Instr. 5)		
Warrant			09/26/2006	09/26/2011	Common Stock	505,590	0.0	65	I	See Footnote <sup>(3)</sup>	
1. Name and Ad Baker Biot	•	ng Person* al II (Z) (GP), L	LC	_							
(Last) 667 MADISO	(First) N AVE 17TH	(Middle FLOOR	e)	_							
(Street) NEW YORK NY 1002		1									
(City)	(State)	(Zip)									
1. Name and Ad	•	ng Person <sup>*</sup>									
(Last) 667 MADISO	(First)	(Middle	9)								
(Street) NEW YORK	NY	1002	1								

1. Name and Addre	. 0	rson <sup>*</sup>	
(Last) 667 MADISON	(First) AVENUE	(Middle)	
(Street) NEW YORK	NY	10021	_
(City)	(State)	(Zip)	_

## **Explanation of Responses:**

- 1. In addition to Baker Biotech Capital II (Z) (GP), LLC, this Form 3 is being filed jointly by Julian C. Baker and Felix J. Baker, each of whom has the same business address as Baker Biotech Capital II (Z) (GP), LLC and may be deemed to have a pecuniary interest in securities owned by it. Because of certain relationships with other security holders of the Issuer, the Reporting Persons are filing solely for informational purposes as if they were a member of a group of such shareholders. (Continued in footnote 2.)
- 2. However, the Reporting Persons disclaim that they and any other person or persons, in fact constitute a "group" for purposes of Section 13(d)(3) of the Securities Exchange Act of 1934, as amended, or Rule 13d-5 thereunder or that they are the beneficial owners of securities owned by any such other persons, and each of them disclaims beneficial ownership of securities reported herein except to the extent of their pecuniary interest, if any, therein.
- 3. Represents securities owned directly by Baker Biotech Fund II (Z), L.P., a limited partnership the sole general partner of which is Baker Biotech Capital II (Z), L.P., a limited partnership the sole general partner of which is Baker Biotech Capital II (Z) (GP), LLC. Felix J. Baker and Julian C. Baker are the controlling members of Baker Biotech Capital II (Z) (GP), LLC.

/s/ Julian C. Baker, as
Managing Member of Baker
Biotech Capital II (Z) (GP),
LLC
/s/ Julian C. Baker

08/17/2006

/s/ Felix J. Baker 08/17/2006

\*\* 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.