FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to	STATEMENT OF C
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	Filed pursuant to :

HANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* SCHAFER CAROL (Last) (First) (Middle) C/O IDERA PHARMACEUTICALS, INC. 505 EAGLEVIEW BLVD., SUITE 212					IL	2. Issuer Name and Ticker or Trading Symbol IDERA PHARMACEUTICALS, INC. [IDRA] 3. Date of Earliest Transaction (Month/Day/Year) 12/18/2018									all applic	cable) or	g Person(s) to Iss 10% O		wner
															below)	(give title		Other (s	вреспу
(Street) EXTON PA 19341 (City) (State) (Zip)					_	4. If Amendment, Date of Original Filed (Month/Day/Year)								Indivi ie) X	Form fi	al or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(3		(Zip)	on-Deri	ivativ	e Sec	curities	s Ac	auired	Di	sposed o	of, or Be	neficia	llv (Owned				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)			action	on 2A. De Execu		Deemed cution Date,		3. 4. Sec		s Acquired of (D) (Instr	(A) or	5. Amou Securiti Benefici Owned		nt of es ally Following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 12/19/2				/2018	18			P		5,000	A	\$3.3342	342 ⁽¹⁾ 5,		,000		D		
			Table II								posed of, converti			/ O\	wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Execution if any (Month/E		4. Transa Code (8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	sable	Expiration Date	Title	Amount or Number of Shares						
Stock Option (Right to	\$3.12	12/18/2018			A		23,000		(2)		12/18/2028	Common Stock	23,000		\$0	23,000)	D	

Explanation of Responses:

- 1. The price reported represents the weighted average sales price of shares purchased in multiple transactions at prices ranging from \$3.293 to \$3.3705 per share. The reporting person hereby undertakes, upon the request of the Staff of the U.S. Securities and Exchange Commission, the issuer or a security holder of the issuer, to provide full information regarding the number of shares purchased at each separate price.
- 2. The option was granted under the Issuer's 2013 Stock Incentive Plan. The option vests and becomes exercisable over a three-year period commencing on December 18, 2018. Thirty-three percent (33%) of the underlying shares vest and become exercisable on December 18, 2019 (first anniversary of the date of grant) with the balance of the underlying shares vesting in eight equal quarterly installments over the remaining two years of the three-year period, subject to continued service with the Issuer. The option automatically becomes exercisable in full upon the occurrence of a change in control of the Issuer.

/s/ Carol Anne Schafer 12/20/2018

** 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 4 (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.