Kirby John J. Form 3 November 02, 2018

# FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number:

3235-0104

Expires:

January 31, 2005

0.5

Estimated average burden hours per

response...

**SECURITIES**Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person \* Statement IDERA PHARMACEUTICALS, INC. [IDRA] Kirby John J. (Month/Day/Year) 10/31/2018 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) C/O IDERA (Check all applicable) PHARMACEUTICALS, INC.. 505 EAGLEVIEW 10% Owner Director BLVD., SUITE 212 \_X\_\_ Officer Other (give title below) (specify below) (Street) 6. Individual or Joint/Group V.P. of Finance, PFO & PAO Filing(Check Applicable Line) \_X\_ Form filed by One Reporting Person EXTON, PAÂ 19341 Form filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 2. Amount of Securities 4. Nature of Indirect Beneficial 1. Title of Security Beneficially Owned Ownership Ownership (Instr. 4) (Instr. 4) Form: (Instr. 5) Direct (D) or Indirect (Instr. 5) Â Common Stock  $2,259^{(1)}$ D Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) owned directly or indirectly. Persons who respond to the collection of information contained in this form are not

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

required to respond unless the form displays a

currently valid OMB control number.

1. Title of Derivative Security
(Instr. 4)

2. Date Exercisable and (Instr. 4)

Expiration Date (Month/Day/Year)

Expiration Date (Month/Day/Year)

Derivative Security

3. Title and Amount of 4.

Securities Underlying Conversion Ownership or Exercise
Form of (Instr. 5)

#### Edgar Filing: Kirby John J. - Form 3

		Expiration Date	(Instr. 4)		Price of	Derivative	
	Date Exercisable		Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)	
Stock Option (Right to Buy)	(2)(3)	11/02/2025	Common Stock	18,750	\$ 24.88	D	Â
Stock Option (Right to Buy)	(2)(4)	01/06/2026	Common Stock	11,249	\$ 23.04	D	Â
Stock Option (Right to Buy)	$\hat{A} = \frac{(2)(5)}{2}$	01/04/2027	Common Stock	12,499	\$ 12.72	D	Â
Stock Option (Right to Buy)	$\hat{A} = \frac{(2)(6)}{}$	01/03/2028	Common Stock	16,874	\$ 17.92	D	Â
Stock Option (Right to Buy)	(2)(7)	08/13/2028	Common Stock	10,000	\$ 7.39	D	Â

# **Reporting Owners**

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Kirby John J. C/O IDERA PHARMACEUTICALS, INC. 505 EAGLEVIEW BLVD., SUITE 212 EXTON, PA 19341	Â	Â	V.P. of Finance, PFO & PAO	Â	

### **Signatures**

/s/ John J. Kirby 11/02/2018

\*\*Signature of Reporting Person Date

## **Explanation of Responses:**

- \* 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).
- (1) Includes 1,809 shares purchased through the Company's 1995 and 2017 Employee Stock Purchase Plans.
- Option vests over a four-year period commencing on the grant date. 25% vests on the first anniversary date of grant with the balance vesting in equal quarterly installments over the remaining three years of the four-year vesting period.
- (3) Grant date 11/2/15.
- (4) Grant date 1/6/16.
- (5) Grant date 1/4/17.
- (6) Grant date 1/3/18.
- (7) Grant date 8/13/18.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners 2