

FREEPORT MCMORAN COPPER & GOLD INC
 Form 4
 December 04, 2002

FORM 4

UNITED STATES SECURITIES AND
 EXCHANGE COMMISSION
 Washington, DC 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL
 OMB Number: 3235-0287
 Expires: January 31, 2005
 Estimated average burden hours per response.....0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 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 Person* Green Steven J.		2. Issuer Name and Ticker or Trading Symbol Freeport-McMoRan Copper & Gold Inc. (FCX)		6. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director <input type="checkbox"/> Owner <input type="checkbox"/> Officer (specify title below) <input type="checkbox"/> Other (specify below)				
(Last) (First) (Middle) 360 North Crescent Drive (Street) Beverly Hills California 90210		3. I.R.S. Identification Number of Reporting Person, if an entity (Voluntary) 4. Statement for Month/Day/Year 08/01/02		7. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person				
(City) (State) (Zip)		Table I — Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned						
1. Title of Security (Instr. 3)		2. Transaction Date (Month/	2A. Deemed Execution Date, if any (Month/	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount or Number of Securities Beneficially Owned or Followed (Instr. 3)	6. Ownership or Control (Instr. 3)	7. Nature of Indirect Beneficial Ownership

Edgar Filing: FREEPORT MCMORAN COPPER & GOLD INC - Form 4

Day/ Year)	Day/ Year)	Code	Amount	(A) or (D)	Price	Transaction(s) (Instr. 4) (Instr. 3 and 4)	(Instr. 4)

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).

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 control number.

(Over)
SEC 1474
(9-02)

FORM 4 (continued)		Table II — Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/ Day/ Year)	3A. Deemed Execution Date, if any (Month/ Day/ Year)	4. Transaction Code (Instr. 3)	5. Number of Derivative Securities Ac- quired (A) or Dis- posed of (D) (Instr. 3, 4 and 5)	6. Date Exer- cisable and Expiration Date (Month/Day/ Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Num of der ivative Secur ities Benefi- ciall Own Follow ing Repor Trans action (Instr.	
				Code	V	(A)	(D)	Date Exer- cisable	Expira- tion Date	Title	Amount or Number of	

Edgar Filing: FREEPORT MCMORAN COPPER & GOLD INC - Form 4

										Shares			
Options ⁽¹⁾ (right to buy)	\$15.195	08/01/02		A	V	10,000		08/01/03 ⁽²⁾	08/01/12	Class B Common Stock	10,000	None	10,000
Stock Appreciation Rights	\$15.195	08/01/02		A	V	6,556		08/01/03 ⁽²⁾	08/01/12	Class B Common Stock	6,556	None	6,556

Explanation of Responses:

- 1. Options with rights to "Option Cancellation Gain" Payments
- 2. 25% exercisable on the date indicated and 25% exercisable on the next three anniversaries thereof

<p>**Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).</p>	<p>/s/ Margaret F. Murphy **Signature of Reporting Person Margaret F. Murphy, on behalf of Steven J. Green</p>	<p>12/02/02 Date</p>
--	--	--------------------------

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.