Edgar Filing: ALLISON ROBERT J JR - Form 4

ALLISON ROBERT J JR

Form 4

December 04, 2002 FORM 4 UNITED STATES SECURITIES AND [] Check this box if no **EXCHANGE COMMISSION** longer Washington, DC 20549 subject to Section 16. Form 4 or OMB APPROVAL Form 5 obligations **OMB** may continue. Number: 3235-0287 STATEMENT OF CHANGES IN BENEFICIAL See Instruction 1(b). Expires: January 31, **OWNERSHIP** 2005 Estimated average burden Filed pursuant to Section 16(a) of the Securities hours per Exchange Act of 1934, Section 17(a) of the Public response......0.5 Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 (Print or Type Responses) 2. Issuer Name and Ticker or Trading 6. Relationship of Reporting Person(s) to Is 1. Name and Address of Reporting Person* Symbol (Check all applicable) X Director 10% Owner Officer Other (speci (give title below) below) Freeport-McMoRan Copper & Gold Inc. Allison, Jr. **Robert** J. (FCX) (Middle) 3. I.R.S. 4. Statement for (Last) (First) Identification Month/Day/Year Number of 7. Individual or Joint/Group Filing (Check Reporting 08/01/02 Applicable Line) Person, if an entity 17001 Northchase Drive 5. If X Form filed by One Reporting Person (Voluntary) Amendment, Form filed by More than One Reporting (Street) Date of Person Original (Month/Day/Year) Houston **Texas** 77060 (City) (State) Table I — Non-Derivative Securities Acquired, Disposed of, or Beneficially Ow (Zip) 1. Title of Security 2. Trans-2A. Transeurities 5. Amount 6. Ownership 7. Nature (Instr. 3) action Deemed Ationired (A) Indire Date Execution Co**de** Disposed of Form: Benef Owne **dafis(tD:8**) Date, if Securities Direct (Instr. 3, 4 Beneficially any (D) ship Owned and 5)

(Month/

Day/

Day/

(Month Code Amount (A) Price Following

or

Indirect

Reported

Edgar Filing: ALLISON ROBERT J JR - Form 4

Year)	Year)		or (D)	Transaction(s)	(I)	(Instr.
			(D)	(Instr.3 and 4)	(Instr.4)	

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

Persons who respond (Over) to the collection of SEC 1474 information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

(p													
FORM 4			T	able I	[–			ve Securities	_	_			Owned
(continued)		r				(e.g.,	puts	s, calls, warr	ants, opti	ons, conve	rtible sec	urities)	_
1. Title of	2. Conver-	3. Trans-	3A.	4. Tra	ns	5. Num	ber	6. Date Exe	er-	7. Title an	d	8. Price	9. Num
Derivative	sion or	action	Deemed	act	ioi	of Deri	V-	cisable a	nd	Amount o	f	of	of de
Security	Exercise	Date	Execution	Co	ode ative		Expiration		Underlying		Deriv-	ative	
(Instr. 3)	Price of		Date, if	(In	(Instr S ecurities		Date		Securities		ative	Secur	
	Deri-	(Month/	any					(Month/Day/		(Instr. 3 and 4)		Secur-	ities
	vative	Day/				Acquir	ed	Year)				ity	Bene-
	Security	Year)	(Month/			(A) or						(Instr.	ficial
			Day/									5)	Owne
			Year)			Dispos	ed						Follo
						of (D)							ing
						(Instr. 3, 4 and 5)							Repo
													Trans
											Amount		action
											or		(Instr
								Date	Expira-		Number		
								Exer-	tion		of		
				Code	V	(A)	(D)		Date	Title	Shares		
Options ⁽¹⁾	\$15.195	08/01/02		A		10,000		08/01/03(2)		1	10,000	None	10,000
(right to buy)	1 + 12 1 1 / 2	3 2. 3 1/ 3 2				2,000		3.7.7.7.00	3 3 3 7 7 2	Common			23,000

^{*} If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Edgar Filing: ALLISON ROBERT J JR - Form 4

						Stock		
Stock Appreciation Rights	08/01/02	A	V	6,556	08/01/03 ⁽²⁾	Class B Common Stock	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

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations.

See

**Signature of Reporting
Person

18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Margaret F. Murphy, on behalf of

/s/ Margaret F. Murphy

Robert J. Allison, Jr.

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.

Page 2

12/02//02

Date