## Edgar Filing: MACHRIBIE ADRIANTO - Form 4

MACHRIBIE ADRIANTO Form 4							
February 05, 2003							
FORM 4	UNITED STATES SECURITIES A	AND					
[ ] Check this box if no	EXCHANGE COMMISSION						
longer	Washington, DC 20549						
subject to Section 16. Form 4 or		OMB APPROVAL					
Form 5 obligations	STATEMENT OF CHANGES IN BEN	EFICIAL OMB					
may continue.	OWNERSHIP	Number: 3235-0287 Expires: January 31,					
See Instruction 1(b).		2005					
	Filed pursuant to Section 16(a) of the S	Estimated average					
	Exchange Act of 1934, Section 17(a) of	the Public burden					
	Utility	response 0.5					
	Holding Company Act of 1935 or Section the Investment Company Act of 19	n 30(n) of					
<ul><li>(Print or Type Responses)</li><li>1. Name and Address of Reporting</li></ul>	2. Issuer Name <b>and</b> Ticker or Trading	6. Relationship of Reporting					
Person*	Symbol	Person(s) to Issuer					
	•	(Check all applicable)					
		Direct <b>0</b> % Owner					
		X Officether (specify (givebelow)					
		title					
		below)					
Machribie Adrianto	Evenout McMcPon Conner & Cold Inc	President Director of PT Freeport					
Macin ible Aui ianto	Freeport-McMoRan Copper & Gold Inc. (FCX)	<u>Indonesia,</u>					
	WAR AR GALLES	a subsidiary of the Issuer					
(Last) (First) (Mid	· ·	.S. Identification4. Statement for					
	Number of Month/Day/Year Reporting 7. Individual or Joint/O						
	Filing (Check Applicable Line)						
	(Voluntary) 02/04/03						
1615 Poydras Street		at, X Form filed by One Reporting					
(Street)	Date of Original	Person Form filed by More than One					
(Street)		Year)Reporting Person					
New Orleans Louisiana 70112							
(City) (State) (Z	Zip) Table I — Non-Derivative Secur Beneficiall						
1. Title of Security	2. Trans- 2A. 3. Transecurities						
(Instr. 3)	action Deemed actAmquired (A						
	Date Execution Codeor Dispos  Date, if (In(\$127)8)	ed of Secu <b>Ficiens</b> : Beneficial Beneficial Owner-					
	any (Instr. 3, 4	•					
	5)	Followingect					
	(Month/ (Month/	Repointed Transaction(a)					
	Day/ Day/	Transaction(s)					

## Edgar Filing: MACHRIBIE ADRIANTO - Form 4

Year) Year) Code/ Amount (A) Price (Ins(Instr. 4) (Instr. 4) or 3 (D) and 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 (Over) to the collection of SEC 1474 information contained (9-02) in this form are not required to respond unless the form displays a currently valid OMB control number.

FORM 4 (continued)			Tal					es Acquired	•		-	Owned
1. Title of	2. Conver-	3. Trans	- 3A.	4. Trans				•	7. Title a		-	9. Number 1
Derivative	sion or	action	Deemed	action	of Deri	V-	cisable	and	Amount	of	of	of deriv-
Security	Exercise	Date	Execution	Code	ative		Expira	tion	Under	lying	Deriv-	ative
(Instr. 3)	Price of		Date, if		S&curiti	es	Date		Securitie	s	ative	Secur-
, , , , , ,	Deri-	(Month/	any	` .	Ac-		(Montl	h/Day/	(Instr.	3 and 4)	Secur-	ities
	vative	Day/	•		quire	d	Year)	•	`	ŕ	ity	Bene-
	Security	Year)	(Month/		(A) or I	Dis-	,				(Instr.	ficially
	·		Day/		posed	d of					5)	Owned
			Year)		(D)						·	Follow-
			ŕ		(Inst	: 3,						ing
				4	4 and 5	)						Reported
										Amount		Trans-
										or		action(s)
						Ι	Date	Expira-		Number		(Instr. 4)
						E	Exer-	tion		of		
				Code V	(A)	(D)c	isable	Date	Title	Shares		
Options <sup>(1)</sup>		0							Class B			
(right to		Common										
buy)	\$18.885	2/04/03		A	85,000	(	)2/04/04	(2) 02/04/13	3 Stock	85,000	None	85,000

## Edgar Filing: MACHRIBIE ADRIANTO - Form 4

## Explanation of Responses:

- 1. Options with limited stock appreciation rights
- 2. 25% exercisable on the date indicated and 25% exercisable on each of the next three anniversaries thereof

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

See

/s/ Margaret F. Murphy

\*\*Signature of
Reporting Person
Margaret F. Murphy, on
behalf of

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

Adrianto Machribie

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

02/05/03

Date