

GROENEVELD OSCAR Y L
 Form 4
 December 04, 2002

FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION
 Washington, DC 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287
 Expires: January 31, 2005

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

Estimated average burden hours per response.....0.5

(Print or Type Responses)

1. Name and Address of Reporting Person*			2. Issuer Name and Ticker or Trading Symbol		6. Relationship of Reporting Person(s) to Issuer (Check all applicable)	
Groeneveld Oscar Y.L.			Freeport-McMoRan Copper & Gold Inc. (FCX)		<input checked="" type="checkbox"/> Director <input type="checkbox"/> Officer (specify title below) <input type="checkbox"/> Other (specify below)	
(Last)	(First)	(Middle)	3. I.R.S. Identification Number of Reporting Person, if an entity (Voluntary)	4. Statement for Month/Day/Year	7. Individual or Joint/Group Filing (Check Applicable Line)	
6 St. James's Square					08/01/02	<input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person
(Street)			5. If Amendment, Date of Original (Month/Day/Year)			
London SW1Y4LD England						
(City)	(State)	(Zip)	Table I — Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned			
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/)	2A. Deemed Execution Date, if any (Month/	3. Transaction Code (Instr. 3, 4 and 5)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)
						5. Acquisition or Disposition of Securities Beneficially Owned (D) or Following Report
						6. Ownership of Securities Beneficially Owned (D) or Following Report
						7. Nature of Indirect Beneficial Ownership

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. Con- ver- sion or Exer- cise Price of Deri- vative Security	3. Trans- action Date (Month/ Day/ Year)	3A. Deemed Execution Date, if any (Month/ Day/ Year)	4. Trans- action Code (Instr. 3)		5. Number of Deriv- ative Secur- ities 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 Deriv- ative Secur- ity (Instr. 5)	9. Num- ber of der- ivative Secur- ities Benefi- cially Own- ing Repor- ing Trans- action (Instr.
				Code V	(D)		Date Exer- cisable	Expira- tion Date			

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										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 Oscar Y.L. Groeneveld</p>	<p>12/02/02 Date</p>
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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.