

Freeport-McMoRan Copper & Gold Foundation

Matching Gifts Program



Partners in Giving...

The Freeport-McMoRan Copper & Gold Foundation Matching Gifts Program is designed to encourage employee contributions to hospitals, community funds, educational and cultural institutions, social service community organizations and environmental organizations, and is an important part of the overall contributions program.

Freeport-McMoRan Copper & Gold Foundation

Matching Gifts Program
One North Central Ave.
Phoenix, AZ 85004

Phone: 602-366-8116 or
1(800)528-1182 ext. 8116

Fax: 602-366-7323

Email:
communityaffairs@fmi.com

PROGRAM DESCRIPTION

The Freeport-McMoRan Copper & Gold Foundation will match employee contributions of \$25 or more, up to an annual maximum of \$20,000. The first \$500 contributed per institution will be double matched and any amount above \$500 will be single matched, subject to the annual maximum. All gifts must be unrestricted.

ELIGIBLE PARTICIPANTS

- All permanent, full-time or part-time employees, and full-time consultants (as designated by Human Resources) employed by Freeport-McMoRan Copper & Gold (FCX) or any division, subsidiary or affiliate of the company.
- **FCX employees located at Phoenix headquarters or any heritage Phelps Dodge operation, should submit this form to the FMCG Foundation located in the Phoenix office at the address provided on this form.**

ELIGIBLE INSTITUTIONS / ORGANIZATIONS

All eligible institutions/organizations in the following categories must be located in the United States and have tax exempt status as designated by the U.S. Internal Revenue Service.

Educational Institutions and Alumni Associations

Any accredited graduate or professional school (including separate schools within a single university); any four-year college, two-year junior or community college; any K-12 public school or private elementary or secondary school (operated and controlled by an independent board of trustees), whether supported privately or by taxation.

Social Service Organizations

Any social service community organization, such as children's or family service organizations, domestic violence shelters, drug abuse prevention agencies, etc.

Hospitals

Any nonprofit hospital.

Environmental Organizations

Nonprofit environmental organizations (such as The Nature Conservancy or Audubon Society).

Cultural Institutions

Any cultural organization, such as museums, libraries, art galleries, orchestras, operas, dance troupes, theatre companies, historical associations, public radio or television stations, botanical gardens, zoological societies, etc.

United Way / Community Funds

Any United Way affiliate or community fund.

CONTRIBUTIONS

- Each contribution must be made personally by the eligible participant, and must be paid and not merely pledged.
- Contributions may be in the form of check, credit card payment, or securities with a quoted market value.

PROCEDURE

To make a contribution matched by the Program, please follow the procedures outlined below:

- Complete sections 1, 2 and 3 of Part A and send the entire form/page (page 3 of this document), with your contribution, to the institution receiving your gift.
- The institution should complete Part B, and return the entire form/page (page 3 of this document) to the Freeport-McMoRan Copper & Gold Foundation at the address indicated on the form.

Once the Form has been received from the recipient organization, the Foundation will verify eligibility of the donor and the recipient organization. Upon verification/approval, the Foundation will send a check for the matching funds directly to the recipient organization.

- The Foundation will return Part C of the form to you, advising you of the action taken with respect to your contribution match.

Note: Please be sure to read the “Eligible Institutions” section of this brochure to ensure an organization is eligible before making your contribution. If this form is received by the Foundation, but the organization is not eligible, the matching gift will be declined. If you are unsure about an organization’s eligibility based on the criteria listed, please contact the FMCG Foundation office at 602-366-8116 or 1 (800) 528-1182 extension 8116.

USE OF FUNDS CONTRIBUTED BY FMCG FOUNDATION

- Contributions made by the Freeport-McMoRan Copper & Gold Foundation under this Program shall be used by recipient institutions as unrestricted grants to aid in achieving their primary purpose and objectives.
- Absolutely no personal, material benefit may be derived by the employee (or a family member) as a result of a Foundation matching grant award to an organization. Funds may not be used to alleviate any personal financial obligation between the employee and the recipient institution.

Funds may NOT be used for any of the following:

- Tuition/fees; housing; travel subsidization; membership fees or dues; event /entrance or subscription fees; insurance payments; equipment fees; event tickets; athletic programs (such as construction of an athletic stadium or athletic scholarships); gifts directly to religious institutions or gifts intended to fulfill pledges, tithes or other religious-related financial commitments; gifts made with funds provided to donor for donation purposes by other persons; gifts to donees not recognized by the IRS as institutions to which contributions are deductible.

GENERAL PROVISIONS AND ADMINISTRATION OF THE PROGRAM

- Any question as to the interpretation, application or administration of this Program, should be addressed with the Foundation in Phoenix. The Foundation will make all determinations and its decisions are final and binding.
- The Foundation reserves the right to change, suspend or terminate this Program at any time with respect to any contributions made thereafter.

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3

PART A

Parts 1, 2 and 3 to be completed by the eligible participant. Mail the entire form/page to the recipient organization with your contribution.

1. Participant/Donor

Employee Full-time consultant

Name (print in full)

Employee ID (PeopleSoft) Number

Mailing Address

City State Zip

(_____) _____
Daytime Telephone Number *(please include area code)*

E-mail Address

Division/Operation

The participant's signature below authorizes the institution to report this gift and to apply for a Matching Gift under the Freeport-McMoRan Copper & Gold Foundation Matching Gifts Program.

Signature of participant/donor

2. Institution Receiving Gift

Name

Address

City State Zip

3. Gift

Amount: \$ _____ Date of Gift: _____

Form of Gift:

Cash (check or credit card payment)

Securities: _____ shares of _____

PART B

To be completed by an official of the recipient institution and mailed along with a copy of the institution's 501(c)3, 509(a)(1, 2 or 3), or 170(c)1 IRS determination ruling to:

Freeport-McMoRan Copper & Gold Foundation
Matching Gifts Program Administrator
One North Central Avenue
Phoenix, AZ 85004

Date of Gift Amount

Institution Receiving Gift

Federal Taxpayer Identification Number

Name of Donor

Type of Institution

- | | |
|---|---|
| <input type="checkbox"/> Public School (K-12) | <input type="checkbox"/> Hospital |
| <input type="checkbox"/> Private, Elementary School | <input type="checkbox"/> Cultural |
| <input type="checkbox"/> Private, Secondary School | <input type="checkbox"/> Environmental |
| <input type="checkbox"/> College or University | <input type="checkbox"/> United Way or |
| <input type="checkbox"/> Junior or Community College | Community Fund |
| <input type="checkbox"/> Alumni Fund or Foundation | <input type="checkbox"/> Social/Community Service |
| <input type="checkbox"/> State or Regional Assoc. of Private Colleges | |
| <input type="checkbox"/> National Fund or Assoc. for Education | |

Educational institution accredited by: _____

The signature below certifies that the institution named above is (a) federally tax exempt, (b) qualifies as an eligible institution as defined in the program description, and (c) the total value of the gift as indicated above was received.

Signature of Institution's Authorized Representative

Name of Authorized Representative *(please print)*

Title Date

Telephone number *(please include area code)*

PART C

To be completed by a representative of Freeport-McMoRan Copper & Gold Foundation.

Freeport-McMoRan Copper & Gold Foundation is pleased to join you in support of the institution named above. We have mailed a check in the amount of:
\$ _____

Freeport-McMoRan Copper & Gold Foundation Representative