

Matching Gifts Plan

FOR ACTIVE EMPLOYEES AND DIRECTORS OF PHELPS DODGE CORPORATION

"Our progress as a nation can be no swifter than our progress in education. The human mind is our fundamental resource."

-John Fitzgerald Kennedy

PHELPS DODGE FOUNDATION

*Global Matching Gifts Plan
For Active Employees
and Directors*

One North Central Ave.
Phoenix, AZ 85004

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

Fax: 602-366-7323

Email:
communityaffairs@
phelpsdodge.com

Partners in Giving...

*Providing a one-to-one match, the **Phelps Dodge Foundation Matching Gifts Plan** is designed to double an employee's charitable contribution(s) to educational institutions. Designated organizations receive two gifts — a gift from an employee and a gift from Phelps Dodge Foundation.*

ELIGIBLE PARTICIPANTS

All permanent, full-time or part-time employees, employed for at least 6 months by Phelps Dodge Corporation or one of its designated subsidiaries, and active members of the Board of Directors of Phelps Dodge Corporation.

QUALIFIED INSTITUTIONS

Contributions to the following types of educational institutions will be matched under the Plan:

- Any public or private, not-for-profit university or two or four-year college, including junior and community colleges.
- Any public or private, not-for-profit secondary school.

Qualified institutions must also be:

- Located in the United States or any territory or possession thereof.
- Accredited by an association acceptable to the Foundation.
- Declared by the Internal Revenue Service to be exempt from income taxes under section 501 (c)(3); 509(a)(1, 2 or 3); or 170(c)1 (an instrumentality of a state or local government) of the U.S. Internal Revenue Code.

CONTRIBUTIONS

- Each contribution must be made personally by the eligible participant, must be actually paid (not merely pledged), and must be made either in cash or in securities having a quoted market value.
- The Market value of any securities contributed shall be determined by the Foundation as the average of the high-low or bid-ask price on the date of the contributor's gift.

PROCEDURE

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

- Complete parts 1, 2 and 3 of Form A and send the entire page (page 3 of this document), with your contribution, to the institution receiving your gift.
- The institution should complete Form B, and return the entire page (page 3 of this document) to the Phelps Dodge Foundation at the address indicated on the form.

Once the matching contribution has been approved, the Foundation will send a check directly to the institution in the amount equal to your contribution.

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

Note: Please be sure to read the “Qualified Institutions” section of this brochure to ensure an organization is eligible. 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 Foundation office at 602-366-8116 or 1 (800) 528-1182 extension 8116.

USE OF FUNDS CONTRIBUTED BY PHELPS DODGE FOUNDATION

- Contributions made by Phelps Dodge Foundation under this Plan 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. (For example, funds may not be applied to student tuition/fees, membership fees, event / entrance fees, equipment fees, event tickets, or used to alleviate any other personal financial obligation between the employee and the recipient institution).

GENERAL PROVISIONS AND ADMINISTRATION OF THE PLAN

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

Annual Grant Limit

- After receipt of the necessary supporting information from the eligible participant and the recipient institution, Phelps Dodge Foundation will disburse the matching funds up to a maximum of \$10,000 in any calendar year.
- Subject to the \$10,000 limit per participant stated previously, the Foundation matches gifts to any number of qualified institutions. There is no minimum dollar contribution.

Matching Gifts Plan

FOR ACTIVE EMPLOYEES AND DIRECTORS OF PHELPS DODGE CORPORATION

FORM A

Parts 1, 2 and 3 to be completed by the eligible participant (active employee or director). Mail the entire form to the recipient organization with your contribution.

1. Participant

Name (print in full)

Employee ID (PeopleSoft) Number

Home Address

City State Zip

Daytime Telephone Number (*please include area code*)

E-mail Address

Date of employment (*for active employees only*)

Phelps Dodge Division/Operation (*for active employees only*)

The participant's signature below authorizes the institution to report this gift and to apply for a Matching Gift under the Phelps Dodge Matching Gifts Plan.

Signature of participant (*active employee or Director*)

2. Institution Receiving Gift

Name

Address City State Zip

3. Gift

Amount: \$ _____ Date of Gift: _____

Form of Gift:

Cash (check or money order)

Securities: _____ shares of _____

FORM 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:

Phelps Dodge Foundation
Matching Gifts Plan
One North Central Avenue
Phoenix, AZ 85004

Please print when filling in the following information.

Date of Gift Amount

Institution Receiving Gift

Phone Number (with area code)

Name of Donor

The signature below confirms that the institution named above has not-for-profit status, has met the conditions of the Phelps Dodge Foundation Matching Gifts Plan, and that the gift described at left & above has been received.

Signature of Institution's Authorized Representative

Name of Authorized Representative (*please print*)

Title Date

Telephone number (*please include area code*)

FORM C

To be completed by a representative of Phelps Dodge Foundation

Phelps Dodge Foundation is pleased to join you in support of the institution named above. We have mailed a check in the amount of:

\$ _____

Phelps Dodge Foundation Representative