Edgar Filing: SIEGELE STEPHEN H - Form 4

| SIEGELE ST | EPHEN H | | | | | | | | | | |
|---|---|-------------|------------------|--|------------|-------------------|--|--|---|--------------|--|
| Form 4 | | | | | | | | | | | |
| July 02, 2009 | | | | | | | | | OMB AF | PROVAL | |
| FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | OMB Number: | 3235-0287 | | | |
| Check this box if no longer subject to Section 16. Form 4 or | | | | NGES IN BENEFICIAL OWNERSHIP OF SECURITIES 16(a) of the Securities Exchange Act of 1934, | | | | | Expires:January 31, 2005Estimated average burden hours per response0.5 | | |
| obligatior may conti <i>See</i> Instru 1(b). | $_{nue.}^{ns}$ Section 17(| a) of the P | ublic Ut | | ling Con | npany | Act of | 1935 or Section | n | | |
| (Print or Type R | esponses) | | | | | | | | | | |
| SIEGELE STEPHEN H Symbol FREEP | | | Symbol FREEPO | er Name and Ticker or Trading PORT MCMORAN COPPER LD INC [FCX] | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) (First) (Middle) 3. Date of (Month/E) ONE NORTH CENTRAL AVENUE 07/01/2 | | | - | | | | Director 10% Owner Officer (give title Other (specify below) | | | | |
| | | | | endment, Date Original nth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| PHOENIX, | AZ 85004 | | | | | | | Form filed by M Person | Iore than One Re | porting | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative | Securi | ities Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | ed Date, if | 3. Transactio Code (Instr. 8) Code V | 4. Securit | ties Ac sposed | cquired d of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of | |
| Common Stock (1) | 07/01/2009 | | | А | 449 | А | \$ 50.11 | 71,559 | D | | |

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

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transacti Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | Expiration D (Month/Day/ e | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | le and int of rlying ities . 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|---|---------------------------------------|---|----------------------------------|--|-------|---|---|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Relationships

Reporting Owners

Reporting Owner Name / Address

| | Director | 10% Owner | Officer | Other | | | | |
|--|----------|-----------|---------|-------|--|--|--|--|
| SIEGELE STEPHEN H ONE NORTH CENTRAL AVENUE PHOENIX, AZ 85004 | | | | | | | | |
| Signatures | | | | | | | | |
| Kelly C. Simoneaux on behalf of Stephen H. Siegele pursuant to a power of attorney | | | | | | | | |
| **Signature of Reporting Person | | | | | | | | |

Explanation of Responses:

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

Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a). **

(1) Amount beneficially owned following the reported transaction includes 5,500 Common Stock Restricted Stock Units.

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.

07/02/2009

Date