

# Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

2017

201/

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Open to Public Inspection

Internal Revenue Service		Go to www.irs.go		ions and the latest if	ntor	mation	Open to Public Inspection
or calendar year	2017 or tax y	year beginning	, 2017	and ending	_	,	
FREEPORT MCI 333 NORTH CI PHOENIX, AZ	ENTRAL A	VENUE, TAX DE	PT		B	Employer identification 13-6077350 Telephone number (see 602-366-810	instructions)
Check all that a  Check type of a  Section 4  Fair market value o  (from Part II, colum	organization 1947(a)(1) no of all assets at e	onexempt charitable tend of year J Acc		oundation orivate foundation ash	D	Foreign organizations, or here and attach computed in private foundation stunder section 507(b)(1).	check here   meeting the 85% test, check aution  atus was terminated (A), check here
<b>►</b> \$	2,166,1		column (d) must be or		F	If the foundation is in a under section 507(b)(1)	
Part I Analys Expensions columns sarily eq	sis of Reve ses (The tota (b), (c), and		(a) Revenue and expenses per books	(b) Net investment income	nt	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
		c , received (attach schedule)	16,000,000.				
DUF 1 -		ion is not required to attach Sch B vary cash investments ecurities					
5 a Gross r	ents Ital income						
or (loss	s)	f assets not on line 10			1	The second secon	V sha mayor
E   b Gross s	sales price for all on line 6a				: : ;		
N 8 Net sho		(from Part IV, line 2) ain			-1	MAY 0 7 2014	3
E 10 a Gross s	sales less and		<del></del>			Const	
allowan <b>b</b> Less C goods s	ost of					The state of the s	
C Gross pro	ofit or (loss) (attach so	· ·					
12 Total.	Add lines 1 thro	ough 11	16,000,000.		0.		).
	nsation of officers	s, directors, trustees, etc	0.				
	n plans, employe			<del></del>		<del> </del>	
A 16a Legal fe	ees (attach sched	tule)					
b Account	ting fees (attach	· .					
Other pro	fessional fees (attac	ch sch)				<del> </del>	
P S 18 Taxes (att	tach scheduleXsee m:	strs)				<del> </del>	+
	iation (attach le) and depletion						
N V ZU Occupa	-						
	conferences, and	· ·					
N V I	and publications appeared to publications and publications are publications.					<del> </del>	
E N		E STATEMENT 1	528.				
S 24 Total o	perating and adr es. Add lines 13		528.				
<b>9</b>	ions, gifts, grants paid	י דעז שמגמ	15, 158, 623.				15,158,623.
	xpenses and dis	bursements.	15,159,151.		0.		15,158,623.
27 Subtrac	t line 26 from Iin	· .	10,109,101.		υ.		13,130,023.
	of revenue over	r expenses	840,849.				
<u> </u>		(if negative, enter -0-)	040,049.		0.		
C Adjuste	ed net income (if	f negative, enter -0-)					).

Par	t II	Balance Sheets	column should be for end-of-year amounts only (See instructions )	Beginning of year		=nd o	t year
				(a) Book Value	<b>(b)</b> Book Valu		(c) Fair Market Value
	1	The state of the s		1,325,316.	2,166,1	65.	2,166,165.
	2		rary cash investments				
	3						
	١.	Less allowance for	doubtful accounts				
	4	Pledges receivable	► 				
	_	Less allowance for	doubtful accounts •				
	5	Grants receivable					
	6	disqualified persons (atta	cers, directors, trustees, and other ch schedule) (see instructions)				
	7	Other notes and loans rec	eivable (attach sch)			$\neg$	
A S		Less. allowance for	doubtful accounts >				
A S S E T	8	Inventories for sale	or use			-+	
E T	9	Prepaid expenses a	nd deferred charges			<del></del>	
s	10:	a Investments – US. obligations (attach s	and state government chedule)		<del> </del>		
	í	Investments — corporate	stock (attach schedule)				
		Investments — corporate			<del> </del>		
		Investments – land, equipment basis.	· ·				
		Less: accumulated depreci (attach schedule)	ation – – – – – – – – – – – – – – – – – – –				
	12	Investments - morto	page loans.			-	
-	13	Investments - other	(attach schedule)			+	
	14	Land, buildings, and	equipment basis►			-	
		Less accumulated depreci (attach schedule)					
	15	Other assets (describ	pe ►			-	
-	16	Total assets (to be c	ompleted by all filers ——————/ Also, see page 1, item I)				
+		Associate associate	Also, see page 1, item 1)	1,325,316.	2,166,16	55.	2,166,165.
ı	17	Accounts payable an	d accrued expenses				
.	18	Grants payable					
	19	Deferred revenue	<u> </u>				
	20		ors, trustees, & other disqualified persons				į
1	21	Mortgages and other notes					
	22	Other liabilities (desc	ribe)				v.
+	23	Total liabilities (add		0.		0.	
		and complete lines 2	ow SFAS 117, check here 4 through 26, and lines 30 and 31.				
F		Unrestricted					
۱ ا	25	Temporarily restricted	ı		· · · · · · · · · · · · · · · · · · ·	$\dashv$	
וכ		Permanently restricte	-		· · · · · · · · · · · · · · · · · · ·	$\dashv$	
3		Foundations that do and complete lines 2	not follow SFAS 117, check here ►X 7 through 31.				
L A	27	Capital stock, trust pr	incipal, or current funds	1,325,316.	2 166 16	_	
N			or land, bldg., and equipment fund	1,323,310.	2,166,16	<u> </u>	
2			ated income, endowment, or other funds		<del></del>	$\dashv$	
Ĕ S			nd balances (see instructions)	1,325,316.	2 166 16	ᅴ	
	31	Total liabilities and ne (see instructions)	et assets/fund balances	1,325,316	2,166,16 2,166,16		
rt I	II A	nalysis of Chang	es in Net Assets or Fund Balance	s	2,100,10	٠.,	
T	otal i	net assets or fund hal	ances at beginning of year – Part II, colun on prior year's return)				1 205 216
E	nter	amount from Part I, II	ne 27a		L	1	1,325,316.
		creases not included in line				2	840,849.
		nes 1, 2, and 3				3	0.166.165
		es not included in line 2 (ite	emize) -			4	2,166,165.
			ances at end of year (line 4 minus line 5)	- Part II column (b) line	30	5 6	2 166 165
A			TEEA0302L 08/			<u> </u>	2,166,165.

(a) List and describe	e the kind(s) of property sold (for example house, or common stock, 200 share	ole, real estate, s MI C Company)	How acquired — Purchase — Donation	(C) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a N/A					
b					
с					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or ((e) plus (f) m	
a					
b	<u> </u>				
С					
d	<u> </u>				
e					
Complete only for assets sho	wing gain in column (h) and owned			(I) Gains (Col.	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col (j), if any		ain minus col. (k), b an -0-) or Losses (fr	
a					
				·	
С					
d					
е					
2 Capital gain net income or (n	net capital loss)	enter in Part I, line 7 ter -0- in Part I, line 7	2		
3 Net short-term capital gain or	r (loss) as defined in sections 1222(5	5) and (6)	Ī		
If gain, also enter in Part I, Ii in Part I, line 8	ne 8, column (c) See instructions It	f (loss), enter -0-	3		
Part V Qualification Unde	er Section 4940(e) for Reduce	ed Tax on Net Investmen	t Income	<del></del>	
If 'Yes,' the foundation doesn't qua	ection 4942 tax on the distributable a lify under section 4940(e) Do not co	emplete this part		Yes	X No
	each column for each year, see the in	structions before making any ent	ries		
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	<b>(c)</b> Net value of noncharitable-use assets	,	<b>(d)</b> Distribution (col (b) divided	
2016	13,795,838.	2,764,3	334.	<u> </u>	4.990655
2015	16,192,387.	5,130,9	931.		3.155838
2014	20,749,223.	7,323,5	86.		2.833205
2013	20,132,306.	7,306,1	136.		2.755534
2012	16,100,657.	8,385,5	39.		1.920050
2 Total of line 1, column (d).			2		15.655282
3 Average distribution ratio for the number of years the foundation	e 5-year base period — divide the total on has been in existence if less than	on line 2 by 5 0, or by the 5 years	3		3.131056
4 Enter the net value of noncha	aritable-use assets for 2017 from Par	t X, line 5	4	3	,77 <u>4,735.</u>
5 Multiply line 4 by line 3			5	11	,818,907.
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)		6		
<b>7</b> Add lines 5 and 6			7	11	,818,907.
8 Enter qualifying distributions			8		,158,623.
If line 8 is equal to or greater th Part VI instructions.	an line 7, check the box in Part VI, line	1b, and complete that part using	g a 1% tax r	ate See the	

			<u>77350</u>		P	age <b>4</b>	
Par		ee ins	truction	ns)			
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1	_				1	
	Date of ruling or determination letter. (attach copy of letter if necessary — see instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V,	$\cdot \perp 1$				0.	
	check here ► X and enter 1% of Part I, line 27b	-	1				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)						
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable		.				
	foundations only, others, enter -0-)	2				0.	
	Add lines 1 and 2	3				0.	
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	_				0.	
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	<u>'</u>			0.	
	Credits/Payments						
	2017 estimated tax pmts and 2016 overpayment credited to 2017  Example foreign arganizations and 2016 overpayment credited to 2017					İ	
	Exempt foreign organizations — tax withheld at source 6 b  Tax paid with application for extension of time to file (Form 8868) 6 c	_	1			- !	
	· · · · · · · · · · · · · · · · · · ·						
	Backup withholding erroneously withheld  Total gradits and payments. Add lines for through 5d.	· <u>-</u>				ر آ	
	Total credits and payments Add lines 6a through 6d	8				<u>0.</u>	
	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	▶ 9					
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<b>1</b> 0				0.	
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  Enter the amount of line 10 to be. Credited to 2018 estimated tax  Refunded	<b>1</b> 11					
	VII-A   Statements Regarding Activities						
				ΤТ	Yes	No	
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?			1 a	165	X	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition			1 b		<u>x</u> _	
	f the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities						
	Ord the foundation file Form 1120-POL for this year?			1 c		X	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.						
	(1) On the foundation		<u>0.</u>	. [	ľ		
	foundation managers •\$ 0.					j	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X	
	f 'Yes,' attach a detailed description of the activities.			├ <u></u>			
2	tas the foundation made any changes, not providually reported to the IDS, up its governing instrument, articles				İ		
3	las the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes			3		X	
	Old the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X	
b	f 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?			4 b	N	'A	
5	Vas there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X	
	f 'Yes,' attach the statement required by General Instruction T.						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			1 1	1	ļ	
•	By language in the governing instrument, or					1	
•	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?			6	X		
	Old the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col (c), and Part XV			7	$\frac{\Lambda}{X}$		
	Enter the states to which the foundation reports or with which it is registered. See instructions			$\vdash$			
	AZ NY		<del></del>				
b l	f the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General						
- (	or designate) of each state as required by General Instruction G? If 'No,' attach explanation			8 b	Х		a
9	s the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If 'Yes,' comple	or 494 ete Pai	12(j)(5) rt XIV	9		<u>X</u> 6	Ţ
10	Old any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses			10		Х	
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	te vii / Ctatemente regarding / teatrice (commence)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule See instructions	11	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement See instructions	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	_ <u>~</u> _
	Website address ► FREEPORTINMYCOMMUNITY.COM			
14	The books are in care of ► TRACY BAME Telephone no ► 602-36	6-8	100	
	Located at ► 333 NORTH CENTRAL AVENUE PHOENIX AZ ZIP + 4 ► 85004-441			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here.	N/Ā		
	and enter the amount of tax-exempt interest received or accrued during the year			N/A
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country			
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
-	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No			1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			İ
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		i	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days )  Yes X No			
t	If any answer is 'Yes' to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1 b	N,	/A
	Organizations relying on a current notice regarding disaster assistance, check here	l		
C	: Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?	1 c		<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017?  Yes X No	,		
	If 'Yes,' list the years ► 20 _ , 20 _ , 20 , 20	i		
t	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer 'No' and attach statement — see instructions).	2 b	N	/A
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	► 20 , 20 , 20 , 20	}		
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No			ļ
b	of If 'Yes,' did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to			
	determine if the foundation had excess business holdings in 2017)	3ь	N	/A_
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		Х
h	Did the foundation make any investment in a prior year (but after December 31, 1969) that could			
~	jeopardize its charitable purpose that had not been removed from jeopardy before the first day of			
BAA	the tax year beginning in 2017?	4 b	)-PF (	X 2017)
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Form 990-PF (2017) FREEPORT MCMORAN Part VII-B Statements Regarding Activit		4720 May Po Doo		077350	Page 6
		11 4/20 May be Rec	luirea (continuea	<u>//</u>	15. 15.
<ul><li>5 a During the year, did the foundation pay or incur a</li><li>(1) Carry on propaganda, or otherwise attern</li></ul>	•	on (section 4945(e))?	Yes	X No	Yes No
(2) Influence the outcome of any specific put on, directly or indirectly, any voter registr	olic election (see section ation drive?	n 4955); or to carry	☐Yes	X No	
(3) Provide a grant to an individual for travel		purposes?	Yes	X No	
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	n a charitable, etc , organ s	ization described	Yes	X No	
(5) Provide for any purpose other than religion educational purposes, or for the prevention	ous, charitable, scientific on of cruelty to children	c, literary, or or animals?	Yes	X No	
<b>b</b> If any answer is 'Yes' to 5a(1)—(5), did <b>any</b> o described in Regulations section 53 4945 or in a See instructions	f the transactions fail to current notice regarding (	qualify under the exce	ptions		N/A
Organizations relying on a current notice rega	ardıng dısaster assıstanı	ce, check here	•		NA
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	isibility for the grant?	·	N/A Yes	No	
If 'Yes,' attach the statement required by Reg		,			
<ul><li>6 a Did the foundation, during the year, receive a on a personal benefit contract?</li><li>b Did the foundation, during the year, pay prem</li></ul>			Yes	X No	V
If 'Yes' to 6b, file Form 8870	nums, unectly of maired	lly, on a personal bene	int contract?	6 Ь	X
7a At any time during the tax year, was the foun	dation a party to a prob	ubited tax shelter transa	action? Yes	X No	
<b>b</b> If 'Yes,' did the foundation receive any proces				N/A 7b	
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Mana	gers, Highly Paid		s,
and Contractors	<del></del>			·	
1 List all officers, directors, trustees, and foun	<del>,</del>				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefi plans and deferre compensation	t (e) Expens	se account, illowances
SEE STATEMENT 2			compensation		
		0.	(	).	0.
					<del></del> -
				ı	
					<u>.                                    </u>
				l	
2 Compensation of five highest-paid employees (or	ther than those included	on line 1 – see instructio	ns). If none, enter 'NOI	 NE.'	
(a) Name and address of each employee paid more than \$50,000	<b>(b)</b> Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferre compensation	t   (e) Expens	se account, illowances
NONE					
				1	
Total number of other employees paid over \$50,000	TEFA03061 0	DIOA II T		Form 900	0 D-PF (2017)
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Part VIII Information About Officers, Directors, Trustees, Four and Contractors (continued)	ndation Managers, Highly Paid E	
3 Five highest-paid independent contractors for professional services. See	instructions. If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	-	
This is a first one of the second of the sec		
Total number of others receiving over \$50,000 for professional services	<u>-</u>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic organizations and other beneficiaries served, conferences convened, research papers produced, etc	cal information such as the number of	Expenses
1 N/A		
' N/A		
		1
2	<del></del>	
3		
~		
4		
Part IX-B   Summary of Program-Related Investments (see Instru	ictions)	<u> </u>
Describe the two largest program-related investments made by the foundation during the		Amount
1 <u>N/A</u>		<del></del>
2		
All other program-related investments See instructions.		
3		
<b>*</b>		
Total. Add lines 1 through 3	•	0.
BAA		Form <b>990-PF</b> (2017)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	15,158,623.
<b>b</b> Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3a	
<b>b</b> Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	15,158,623.
Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b See instructions	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	15,158,623.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

BAA

Form **990-PF** (2017)

# Part XIII Undistributed Income (see instructions)

1 Distributable amount for 2017 from Part XI, line 7 2 this distributed income, if any, at of the end of 2017: a Enter amount for 2016 only by 1 total for grow years 20 20 20 3 boss distributions carryveyer, if any, to 201. 3 From 2012 15, 681, 380. 6 From 2013 19, 767, 0.05. 6 From 2014 20, 383, 0.44. 6 From 2015 15, 935, 840. 1 Total of lines 3 throught e 4 Causifying distributions for 2017 from Part XII, line 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		(a) Corpus	(b) Years prior to 2016	<b>(c)</b> 2016	<b>(d)</b> 2017
2 Undestributed manne, if any, as of the end of 2017: a Enter amount for 2016 only b Trial for part year; 70 _ 70 _ 70 3 Goes destributions carryover, if any, to 2017. a From 2012	1 Distributable amount for 2017 from Part XI,				
a Enter amount for 2016 only b Total for gen year: 20, 20, 20 3 Excess destinations cargover, if any, to 201, a From 2012			-		188,737
a Form 2012					
3 Excess distributions carryover, if any, to 2017. a From 2013 b From 2014 15, 681, 380. e From 2015 15, 933, 840. e From 2015 15, 933, 840. e From 2016 13, 657, 621. f Total of lines 3a through e 4 Qualifying distributions for 2017 from Part XII, line 4 * \$ 15, 158, 623. a Applied to 2016, but not more than line 2a b Applied to 2016, but not more than line 2a b Applied to 2016, but not more than line 2a c Excess distributions out of corpus (election required — see instructions) d Applied to 2017 distributibate amount e Remaining amount distributed out of corpus (if an amount must be shown in column (a))  6 Exter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e. Subtract line 5 b Prior years' undistributed income subtract line 4b from line 2 to 2017 distribution in the 2c and 3d and 5f from line 1 This amount must be deficiency has been insucutions  6 Undistributed income for 2017, Subtract lines 4b from line 2 to 3d and 3d from line 1 This amount must be distributed in 2018  6 Subtract line 6c from line 5 This amount must be distributed income for 2017. Subtract lines 4b from line 1 This amount must be distribution in 5 or line 7 (see instructions)  7 Amounts traced as a distributions out of corpus to satisfy requirements imposed by section 1700/01/(7) or 349/20/3 (election may be required—see instructions)  8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions)  9 Excess firstibutions carryover from 2012 not applied on line 5 or line 7 (see instructions)  10 Analysis of line 9. a Excess from 2015 a Excess from 2015 b Excess from 2015 c Excess from 2017 c Excess from 2017 c Excess from 2017 c Excess from 2017 c Excess from 2017 c Excess from 2017 c Excess from 2017 c Excess from 2017 c Excess from 2017 c Excess from 2017 c Excess from 2017 c Excess from 2017 c Excess from 2017 c Excess from 2017				0.	<del></del>
a From 2013			U.		
b From 2014					
CFrom 2015		-			
A From 2015		-			
From 2016					
1 Total of lines 3 at through e   85, 424, 890.		1			
4 Qualifying distributions for 2017 from Part XIII, line 4 * * \$ 15,158,623. a Applied to 2016, but not more than line 2a b Applied to undistributed income of prior years (Election required – see instructions) c Treated as distributions out of corpus (election required – see instructions) d Applied to 2017 distributed income of prior years (Election required – see instructions) d Applied to 2017 distributable amount e Remaining amount distributed out of corpus Esses distributions carpine to 227 (fan amount appears in column (d), the same amount must be shown in column (a) to same amount must be shown in column (a) to same amount must be shown in column (a) to same amount must be shown in column (b) and the same amount must be shown in column (b) to same amount prior years' undistributed income Subtract line 4b from line 2b Enter the net total of each column as indicated below: a Carpus Add lines 3f, 4c, and 4e. Subtract line 5 Denor years' undistributed income Subtract line 4b from line 2b Enter the amount of prior years' undistributed income for which a notice of deficiency has been instead, or on which the section 4942(a) tax has been previously assessed  G Subtract line 6c from line 6b Taxable amount – see instructions  G Undistributed income for 2016. Subtract lines 4d and 5 from line 6 Taxable amount – see instructions  G Undistributed income for 2017. Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018  G Amounts treated as distributions out of corpus to safely requirements imposed by section 170(b)(f) or 4942(b)(3) (Election applied on line 5 or line 7 (see instructions)  G Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions)  B Excess from 2014  G Excess from 2015  G Excess from 2015  G Excess from 2016  G Excess from 2017  G Excess from 2017  G Excess from 2017  G Excess from 2017  G Excess from 2017  G Excess from 2017  G Excess from 2017  G Excess from 2017  G Excess from 2017  G Excess from 2017  G Excess from 2017  G Excess from 2017  G	f Total of lines 3a through e .	85.424 890		İ	
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## Be required — see instructions   0.    ## Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions)   15,681,380.    ## Excess distributions carryover to 2018.	section 170(b)(1)(F) or 4942(q)(3) (Election				
## Subtract line 5 or line 7 (see instructions)  ## Subtract lines 7 and 8 from line 6a  ## Subtract lines 8 and 8 and 8 and 8 and 8 and 8 and 8 and 8 and 8 and 8 and	may be required – see instructions)	0.			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a  10 Analysis of line 9.  a Excess from 2013	8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions)	15,681,380.			
Subtract lines 7 and 8 from line 6a  10 Analysis of line 9.  a Excess from 2013 b Excess from 2014 c Excess from 2015 d Excess from 2016 e Excess from 2017  84,713,396.  84,713,396.	9 Excess distributions carryover to 2018.		7	· · · · · · · · · · · · · · · · · · ·	<del></del>
a Excess from 2013 19,767,005. b Excess from 2014 20,383,044. c Excess from 2015 15,935,840. d Excess from 2016 13,657,621. e Excess from 2017 14,969,886.	Subtract lines / and 8 from line 6a	84,713,396.			
b Excess from 2014 20,383,044. c Excess from 2015 15,935,840. d Excess from 2016 13,657,621. e Excess from 2017 14,969,886.					
c Excess from 2015 15, 935, 840. d Excess from 2016 13, 657, 621. e Excess from 2017 14, 969, 886.					
d Excess from 2016 13,657,621. e Excess from 2017 14,969,886.					
e Excess from 2017 14, 969, 886.	15, 933, 640.				
14,505,660.					
	<u>e Excess from 2017</u> 14, 969, 886.				

Form 990-PF (2017) FREEPORT MCMORAN				13-607735	
Part XIV Private Operating Foundat				<u> </u>	N/A
1 a If the foundation has received a ruling or dete is effective for 2017, enter the date of the	ruling	· ;			1 4040 11 70
<b>b</b> Check box to indicate whether the foundat		erating foundation o		4942(j)(3) or	4942(1)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	1	(e) Total
investment return from Part X for each year listed	<b>(a)</b> 2017	<b>(b)</b> 2016	(c) 2015	(d) 2014	
<b>b</b> 85% of line 2a.			<del></del>		
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					H
(1) Value of all assets					<u></u>
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test – enter.					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942()(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income			<del></del>		
Part XV Supplementary Information	(Complete this	part only if the	foundation had	\$5,000 or more	in
assets at any time during the		structions.)			
1 Information Regarding Foundation Managers of the foundation who have		an 2% of the total ac	antributions recoived l	by the foundation hef	ara tha
close of any tax year (but only if they have	contributed more	than \$5,000) (See	section 507(d)(2).)	by the loundation ben	ore the
<b>b</b> List any managers of the foundation who own	10% or more of the	stock of a corporation	n (or an equally large	portion of the owner	ship of
a partnership or other entity) of which the NONE	foundation has a 10	0% or greater intere	est	•	'
2 Information Regarding Contribution, Grant, G Check here  ☐ If the foundation only mal requests for funds. If the foundation makes	ces contributions to p	preselected charitable	e organizations and c ganizations under o	loes not accept unsol ther conditions, com	icited iplete items
2a, b, c, and d See instructions  a The name, address, and telephone number or					
a me name, address, and telephone number or	email address or the	e person to wnom ap	plications should be a	addressed:	
SEE STATEMENT 3					
b The form in which applications should be s	ubmitted and inform	nation and materia	ls they should include		
Spendations should be s	admitted and initial	and materia	no they should inclu	uo.	
SEE STATEMENT FOR LINE 2A					
c Any submission deadlines					
SEE_STATEMENT FOR LINE 2A					
d Any restrictions or limitations on awards, s	uch as by geograph	nical areas, charital	ble fields, kinds of i	nstitutions, or other	factors
SEE STATEMENT FOR LINE 2A					
RAA		A0310L 00/14/17			000 PE (2017)

3 Grants and Contributions Paid During the Ye	ar or Approved for Fut	ure Paymen	nt	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
SEE STATEMENT 4	NONE		1	15,158,623
				i
			-	
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			1	
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			}	
		ĺ		
		ĺ	(	
		l		
		1		
Total			► 3a	15, 158, 623
<b>b</b> Approved for future payment				
	i			
			İ	
	Ì		1	
	,			
			Į.	
		}		
Total			► 3b	
ΒΔΔ	TEE 405011 00			Form 000 PE (2017)

	gross amounts unless otherwise indicated		ousiness income	Excluded by	section 512, 513, or 51	4
	Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
а	Trogram control to the control	<del>                                     </del>		Code		<del> </del>
a b		<del> </del>		-+		+
c		<del> </del>				<del></del>
d		<del> </del>		++-		<del> </del>
e				+		<del> </del>
f		<del> </del>		<del></del>		<del> </del>
	Fees and contracts from government agencies	<del> </del>		<del></del>		<del> </del>
-	Membership dues and assessments	<del></del>			<del></del>	<del> </del>
	Interest on savings and temporary cash investments	<b></b>		<del></del>	<del></del>	+
	Dividends and interest from securities			+		<del></del>
	Net rental income or (loss) from real estate	<del>    -</del>				
	Debt-financed property	<del> </del>		+		<del></del>
	Not debt-financed property					<del></del>
	Net rental income or (loss) from personal property	<del></del>			<del> </del>	<del></del>
	Other investment income	<b></b>	<del></del>			<del> </del>
	Gain or (loss) from sales of assets other than inventory					<del></del>
	Net income or (loss) from special events.	<del></del>				<del></del>
	Gross profit or (loss) from sales of inventory	<del></del>		<del></del>		<del></del>
	Other revenue	<del> </del>				
	Other revenue					· · · · · · · · · · · · · · · · · · ·
a		<del> </del>				<del>_</del>
b <sub>.</sub>		<del>                                     </del>				<del></del>
C.		<del>                                     </del>				<del></del>
d		<del> </del>				
e		<del> </del>				
	Subtotal Add columns (b), (d), and (e)	L		_l		
13	Total. Add line 12, columns (b), (d), and (e)				13	0.
<b>13</b> (See v	<b>Total.</b> Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculati					0.
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B   Relationship of Activities to the	Accomplish		<u></u>	es	
<b>13</b> (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B   Relationship of Activities to the	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	
13 (See v	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which is accomplishment of the foundation's exempt	<b>Accomplish</b>		<u></u>	es	

# Form 990-PF (2017) FREEPORT MCMORAN FOUNDATION 13-6077350 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

describ relating a Transfe (1) Ca: (2) Oth b Other t (1) Sa: (2) Pui (3) Rei (4) Rei (5) Loa (6) Pei c Sharing d If the a	need in section 501(c) of to political organizations from the reporting sharer assets from the respective sections less of assets to a nor richases of assets from tall of facilities, equipment arrange and or loan guaranteer formance of services of facilities, equipments are to any of the ads, other assets, or se	of the Code (other ations? g foundation to a number of the code of	exempt organization	panizations) or in section of section of section of section of section (b) should build a should be section of section of section sect	I always show the fair n	1 a (1) 1 a (2) 1 b (1) 1 b (2) 1 b (3) 1 b (4) 1 b (5) 1 b (6) 1 c	Yes No X X X X X X X X X X X X X X X X X X X
(a) Line no.	(b) Amount involved		icharitable exempt organization		f transfers, transactions, and s		nements
describ	oundation directly or inced in section 501(c) of complete the follow	of the Code (other	n, or related to, one or more than section 501(c)(3)) or	tax-exempt organization section 527?	ns	Yes	XNo
	a) Name of organizati	_ ~	(b) Type of organization	on I	(c) Description of rela	tionship	
N/A							
Sign Here	penalties of perjury, I declar, and complete Declaration at ure of officer or trystee  Print/Type preparer's part		his return, including accompanying axpayer) is based on all information to be a part of the part of th	schedules and statements, a n of which preparer has any I		May the II this return preparer s See instru	RS discuss with the shown below?
Paid Preparer Use Only	Firm's name Firm's address		SELF-PREPARED		Check self-employed  Firm's EIN Phone no		
BAA						Form <b>99</b> 0	<b>)-PF</b> (2017)

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2017

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of the organization		Employer identification number					
FREEPORT MCMORAN FOUNDATIO	ON	13-6077350					
Organization type (check one)							
Filers of:	Section:						
Form 990 or 990-EZ	501(c)( ) (enter number) organization	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not tre	eated as a private foundation					
	·						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated	d as a private foundation					
	501(c)(3) taxable private foundation	·					
Check if your organization is covered by the G	eneral Rule or a Special Rule.						
Note. Only a section 501(c)(7), (8), or (10	) organization can check boxes for both the General Ru	le and a Special Rule. See instructions					
General Rule							
X For an organization filing Form 990, 9 property) from any one contributor Co	90-EZ, or 990-PF that received, during the year, contrib implete Parts I and II See instructions for determining	utions totaling \$5,000 or more (in money or a contributor's total contributions					
Special Rules							
under sections 509(a)(1) and 170(b)(1)(A received from any one contributor, du	on 501(c)(3) filing Form 990 or 990-EZ that met the 33- )(vi), that checked Schedule A (Form 990 or 990-EZ), Part I ring the year, total contributions of the greater of (1) \$5 m 990-EZ, line 1 Complete Parts I and II	I. line 13, 16a, or 16b, and that					
For an organization described in section during the year, total contributions of purposes, or for the prevention of crue	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that more than \$1,000 <i>exclusively</i> for religious, charitable, so lity to children or animals. Complete Parts I, II, and III	received from any one contributor, cientific, literary, or educational					
during the year, contributions exclusive \$1,000 If this box is checked, enter his charitable, etc., purpose. Don't complete	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that ely for religious, charitable, etc., purposes, but no such ere the total contributions that were received during the ete any of the parts unless the <b>General Rule</b> applies to aritable, etc., contributions totaling \$5,000 or more duri	contributions totaled more than year for an exclusively religious, this organization because					
990-PF), but it <b>must</b> answer 'No' on Part I	d by the General Rule and/or the Special Rules doesn't V, line 2, of its Form 990, or check the box on line H of t the filing requirements of Schedule B (Form 990, 990-	ts Form 990-EZ or on its Form 990-PF.					

BAA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

FREEP(	ORT MCMORAN FOUNDATION		5077350
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional spa	ce is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FREEPORT MINERALS CORPORATION		Person X Payroll
	333 NORTH_CENTRAL_AVENUE	16,000,000	7
	PHOENIX, AZ 85004-4415		(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$s	Person Payroll Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		   \$	Person Payroll Noncash  (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
l		- \$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		- \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$s	Person Payroll Noncash (Complete Part II for noncash contributions.)
BAA	TEFA0702L 08/09/17	Schedule B (Form 9	90. 990-EZ. or 990-PF) (2017)

Page

1 of Part I

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Page

1 to

of Part II

Name of organization

FREEPORT MCMORAN FOUNDATION

Employer identification number

1

13-6077350

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
N/A			
(a) No. from Part I	(b)  Description of noncash property given	\$  (c)  FMV (or estimate) (See instructions.)	(d) Date received
(a) No	(b)	\$	(4)
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		  \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		  \$	

of Part III

lame of organizat	ion	
FREEPORT	MCMORAN	FOUNDATION

1 to 1 of Par Employer identification number 13-6077350

Part III	exclusively religious, charitable, etc or (10) that total more than \$1,000 for the the following line entry. For organizations co- contributions of \$1,000 or less for the year. ( Use duplicate copies of Part III if additional s	e year from any one contribution part III, enter the total Enter this information once Section is needed.	i <b>tor.</b> Complete of <i>exclusivel</i>	columns (a) through (e) and y religious, charitable, etc., )  , N/A		
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
Part I	N/A			······································		
	Transferee's name, address	(e) Transfer of gift , and ZIP + 4	Relati	onship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
		(e) Transfer of gift				
	Transferee's name, address	Relati	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	Use of gift		(d) Description of how gift is held		
;	Transferee's name, address	(e) Transfer of gift	Polati	onship of transferor to transferee		
	Transletee's flame, address					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	Transferee's name, address	(e) Transfer of gift , and ZIP + 4	Relation	Relationship of transferor to transferee		

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# **FEDERAL STATEMENTS**

PAGE 1

#### FREEPORT MCMORAN FOUNDATION

13-6077350

#### STATEMENT 1 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME		(D) CHARITABLE PURPOSES
ADMINISTRATIVE EXPENSES NEW YORK FILING FEE	TOTAL	\$ 278. 250. 528.	\$ 0.	\$ 0	<u> </u>	0.

#### STATEMENT 2 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	BUTION TO	EXPENSE ACCOUNT/ OTHER
TRACY L BAME 333 NORTH CENTRAL AVENUE PHOENIX, AZ 85004-4415	PRESIDENT 0	\$ 0.	\$ 0.	\$ 0.
MICHAEL J ARNOLD 333 NORTH CENTRAL AVENUE PHOENIX, AZ 85004-4415	VICE PRESIDENT 0	0.	0.	0.
DEAN T FALGOUST 333 NORTH CENTRAL AVENUE PHOENIX, AZ 85004-4415	VICE PRESIDENT 0	0.	0.	0.
KATHLEEN L QUIRK 333 NORTH CENTRAL AVENUE PHOENIX, AZ 85004-4415	TREASURER 0	0.	0.	0.
DOUGLAS N CURRAULT II 333 NORTH CENTRAL AVENUE PHOENIX, AZ 85004-4415	SECRETARY 0	0.	0.	0.
PAMELA Q MASSON 333 NORTH CENTRAL AVENUE PHOENIX, AZ 85004-4415	EXECUTIVE DIR.	0.	0.	0.
SARAH M GENNUSA 333 NORTH CENTRAL AVENUE PHOENIX, AZ 85004-4415	MANAGER 0	0.	0.	0.
RICHARD J. ADKERSON 333 NORTH CENTRAL AVENUE PHOENIX, AZ 85004-4415	MEMBER 0	0.	0.	0.
L. RICHARDS MCMILLAN II 333 NORTH CENTRAL AVENUE PHOENIX, AZ 85004-1115	MEMBER 0	0.	0.	0.

2017

## FEDERAL STATEMENTS

PAGE 2

FREEPORT MCMORAN FOUNDATION

13-6077350

# STATEMENT 2 (CONTINUED) FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	BUTTON TO	EXPENSE ACCOUNT/ OTHER
CAROL M LINDSAY 333 NORTH CENTRAL AVENUE PHOENIX, AZ 85004-4415	ASST TREASURER 0	\$ 0.	\$' 0.	\$ 0.
MICHAEL J. ARNOLD 333 NORTH CENTRAL AVENUE PHOENIX, AZ 85004-4415	DIRECTOR 0	0.	0.	0.
L. RICHARDS MCMILLAN II 333 NORTH CENTRAL AVENUE PHOENIX, AZ 85004-4415	DIRECTOR 0	0.	0.	0.
KATHLEEN L. QUIRK 333 NORTH CENTRAL AVENUE PHOENIX, AZ	DIRECTOR 0	0.	0.	0.
KATHLEEN L. QUIRK 333 NORTH CENTRAL AVENUE PHOENIX, AZ 85004-4415	MEMBER 0	0.	0.	0.
TRACY L BAME 333 NORTH CENTRAL AVENUE PHOENIX, AZ 85004-4415	MEMBER 0	0.	0.	0.
MICHAEL J ARNOLD 333 NORTH CENTRAL AVENUE PHOENIX, AZ 85004-4415	MEMBER 0	0.	0.	0.
	TOTAL	\$ 0.	\$ 0.	\$ 0.

# STATEMENT 3 FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

NAME:

FREEPORT-MCMORAN FOUNDATION

TRACY BAME

NO

CARE OF: STREET ADDRESS:

333 NORTH CENTRAL AVENUE

CITY, STATE, ZIP CODE:

PHOENIX, AZ 85004

TELEPHONE:

E-MAIL ADDRESS:

FORM AND CONTENT:

A LETTER ON THE ORGANIZATION'S LETTERHEAD AND A PROPOSAL

FOR USE OF FUNDS.

SUBMISSION DEADLINES:

RESTRICTIONS ON AWARDS:

GRANTS ONLY TO ORGANIZATIONS WHO DISTRIBUTE ACCORDING TO

PURPOSES DESCRIBED IN SEC 170(C)(1) OR 170(2)(B)