FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

TEMENT OF	CHANGES IN	BENEFICIAL	OWNERSH

OMB APPRO	VAL						
OMB Number:	3235-0287						
Estimated average burden							
hours per response:	0.5						
	OMB Number: Estimated average burde						

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* BRENNAN EDWARD A			2. Issuer Name and Ticker or Trading Symbol AMR CORP [AMR]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner							
												X Directo						
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year)								Officer below)	(give title		Other (s below)	specify		
(Last)	`	,	` '	00.400	04/02/2004								23.511)			20.0.0)		
400 NORTH MICHIGAN AVENUE, SUITE 400400																		
				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)														,	iled by One	Dono	rtina Dorcor	,
CHICAC	GO IL	ı.	60611												,		J	I
			1									Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)															
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of S	Security (Inst	tr. 3)		2. Transa	ction				3.			ties Acquir		5. Amou				7. Nature
Date (Month/D			Execution Date,			Transaction Disposed Of (D) (Instr. 3, 4 Code (Instr. 5)			tr. 3, 4 an	nd Securities Beneficially				of Indirect Beneficial				
			((Month/Day/Year)							Owned F	ollowing (I) (Ir		nstr. 4)	Ownership			
							Code	v	Amount	(A) oi	Price	Reporte Transac	tion(s)			(Instr. 4)		
						Couc		Amount	(D) F		(Instr. 3	and 4)						
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
												ble secu						
1. Title of	2.	3. Transaction	3A. Deeme						6. Date Exercisable and 7. Title and Am			8. Price of	9. Number		10.	11. Nature		
Derivative			Execution I		ransaction ode (Instr.				Expiration Date of Securities (Month/Day/Year) Underlying				Derivative Security	derivative Securities		Ownership Form:	of Indirect Beneficial	
(Instr. 3) Price of (Month/Day							Securities `		Derivative Secu			Security	(Instr. 5)	Beneficially Owned		Direct (D) or Indirect	Ownership	
	Derivative					Acquired (Instr. 3 and 4)						iu 4)		Following		(I) (Instr. 4)	(Instr. 4)	
						Disposed of (D) (Instr.								Reported Transaction	eported ransaction(s)			
				3, 4 and 5)				(Instr. 4)				(5,						
								П		Т			Amount	1				
								ΙI					or Number					
					ode	v	(0)	(D)	Date Exercisab		Expiration Date	Title	of Shares					
				- 10	oue	V	(A)	(0)	Exercisab	ie L	Jait	Tille	Silates			_		
Phantom Stock	(2)	03/31/2004			A		153.49		(3)		(3)	Common	 153.49	(2)	37,554.9	₁₆	D	
units ⁽¹⁾	`´	05/51/2004		- 1	.,		155.45	Ιl				stock	100.40		37,554.5	~		

Explanation of Responses:

- 1. Phantom stock units are deferred compensation. Fees are converted into PSUs based on the average market value of AMR common stock during the deferral month. Exercise/expiration dates are determined at
- 2. The price of the shares will be determined at retirement.
- 3. Exercise/expiration dates of Phantom Stock Units for deferred compensation are determined at retirement.

Remarks:

/s/ Charles D. MarLett, by POA 04/02/2004

** Signature of Reporting Person Date

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.