## SECURITIES AND EXCHANGE COMMISSION

Washington, DC 20549

# **SCHEDULE 13G**

(Rule 13d-102)

INFORMATION TO BE INCLUDED IN STATEMENTS FILED PURSUANT TO § 240.13d-1(b), (c) AND (d) AND AMENDMENTS THERETO FILED PURSUANT TO § 240.13d-2 (Amendment No. 5)

# AMERICAN AIRLINES GROUP INC.

(Name of Issuer)

COMMON STOCK (Title of Class of Securities)

02376R102 (CUSIP Number)

April 8, 2020 (Date of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

☐ Rule 13d-1 (b)

☐ Rule 13d-1 (d)

\* The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter disclosures provided in a prior cover page.

The information required on the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 (the "Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes.)

1	NAME O	NAME OF REPORTING PERSON			
		Warren E. Buffett			
2	CHECK T (a) ⊠		E APPROPRIATE BOX IF A MEMBER OF A GROUP $\Box$		
	(a) 🖾	(D	, <u> </u>		
3	SEC USE	ON	NLY		
4	CITIZEN	SH	IP OR PLACE OF ORGANIZATION		
	United Sta	ates	Citizen		
		5	SOLE VOTING POWER		
NIIN	MBER OF		NONE		
SI	HARES	6	SHARED VOTING POWER		
	EFICIALLY NED BY		0 shares of Common Stock		
	EACH ORTING	7	SOLE DISPOSITIVE POWER		
PERSON			NONE		
7	WITH		SHARED DISPOSITIVE POWER		
	0 shares of Common Stock				
9	AGGREG	AT	E AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON		
	0 shares o	f C	ommon Stock		
10	CHECK E	302	X IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES □		
	Not Appli	cab	le.		
11			F CLASS REPRESENTED BY AMOUNT IN ROW 9		
	0%				
12	TYPE OF	RE	EPORTING PERSON		
	IN				

1	NAME OF REPORTING PERSON				
	Berkshire Hathaway Inc.				
2	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP				
	(a) $\boxtimes$ (b) $\square$				
3	SEC USE ONLY				
4	CITIZENCHID OD DI ACE OF ODC ANIZATION				
4	CITIZENSHIP OR PLACE OF ORGANIZATION				
	State of Delaware				
	5 SOLE VOTING POWER				
NUN	MBER OF NONE				
	HARES 6 SHARED VOTING POWER				
	EFICIALLY				
	VNED BY 0 shares of Common Stock				
	EACH 7 SOLE DISPOSITIVE POWER PORTING 7 SOLE DISPOSITIVE POWER				
	ERSON NONE				
WITH 8 SHARED DISPOSITIVE POWER					
O STRICED DISTOSITIVE TOWER					
	0 shares of Common Stock				
9	AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON				
	0 shares of Common Stock				
10	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES □				
	NT.,				
11	Not applicable.  PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9				
11	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9				
	0%				
12	TYPE OF REPORTING PERSON				
	HC, CO				

1	NAME OF REPORTING PERSON					
		National Indemnity Company				
2	CHECK 7 (a) ⊠		E APPROPRIATE BOX IF A MEMBER OF A GROUP ) □			
	(a) 🖾	(D	) L			
3	SEC USE	ON	NLY			
4	CITIZEN:	SHI	IP OR PLACE OF ORGANIZATION			
	State of N	ebr	aska			
		5	SOLE VOTING POWER			
NIIN	MBER OF		NONE			
SI	HARES	6	SHARED VOTING POWER			
	EFICIALLY NED BY		0 shares of Common Stock			
	EACH	7				
REPORTING		,	SOLE DISTOSTITY LTOWER			
PERSON			NONE			
WITH 8 SHARED DISPOSITIVE POWER						
	0 shares of Common Stock					
9	AGGREG	AT	E AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON			
	O shares o	f C	ommon Stock			
10	0 shares of Common Stock  CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES □					
	Not applicable.					
11	PERCEN'	ГΟ	F CLASS REPRESENTED BY AMOUNT IN ROW 9			
	0%					
12	TYPE OF	RE	EPORTING PERSON			
	IC, CO					
	10, 00					

1	NAME OF REPORTING PERSON				
	GEICO C	GEICO Corporation			
2	CHECK 7 (a) ⊠		E APPROPRIATE BOX IF A MEMBER OF A GROUP  ) □		
		`			
3	SEC USE	ON	NLY		
4	CITIZEN	SH	IP OR PLACE OF ORGANIZATION		
	State of D	ela			
		5	SOLE VOTING POWER		
NUN	MBER OF		NONE		
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OW	NED BY		0 shares of Common Stock		
EACH REPORTING		7	SOLE DISPOSITIVE POWER		
PERSON WITH			NONE		
VV1111		8	SHARED DISPOSITIVE POWER		
9			0 shares of Common Stock		
9	AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON				
10	0 shares of Common Stock				
10	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES □				
	Not applicable.				
11	PERCEN'	ГΟ	F CLASS REPRESENTED BY AMOUNT IN ROW 9		
	0%				
12	TYPE OF	RE	EPORTING PERSON		
	HC, CO				

1	NAME O	NAME OF REPORTING PERSON			
		Government Employees Insurance Company			
2	CHECK T (a) ⊠		E APPROPRIATE BOX IF A MEMBER OF A GROUP $\Box$		
	(a) 🖾	(U	<i>)</i>		
3	SEC USE	ON	NLY		
4	CITIZEN	SH	IP OR PLACE OF ORGANIZATION		
	State of M	Iary	rland		
		5	SOLE VOTING POWER		
NIIN	MBER OF		NONE		
SI	HARES	6	SHARED VOTING POWER		
	EFICIALLY NED BY		0 shares of Common Stock		
	EACH ORTING	7	SOLE DISPOSITIVE POWER		
PERSON			NONE		
7	WITH		SHARED DISPOSITIVE POWER		
	0 shares of Common Stock				
9	AGGREG	AT	E AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON		
	0 shares o	f C	ommon Stock		
10	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES □				
	Not applicable.				
11	PERCEN'	ГΟ	F CLASS REPRESENTED BY AMOUNT IN ROW 9		
	0%				
12	TYPE OF	RE	EPORTING PERSON		
	IC, CO				
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1	NAME OF REPORTING PERSON					
		GEICO Advantage Insurance Company				
2	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP  (a) □ (b) □					
	(a) ⊠	(U	<i>)</i>			
3	SEC USE	ON	NLY			
4	CITIZEN:	SHI	IP OR PLACE OF ORGANIZATION			
	State of N	ebr	aska			
		5	SOLE VOTING POWER			
NIIN	MBER OF		NONE			
_	HARES	6	SHARED VOTING POWER			
	FICIALLY					
	NED BY		0 shares of Common Stock			
EACH REPORTING		7	SOLE DISPOSITIVE POWER			
PERSON			NONE			
WITH 8			SHARED DISPOSITIVE POWER			
	0 shares of Common Stock					
9	AGGREG	AT	E AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON			
	0 shares o	f C	ommon Stock			
10	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES □					
	Not applic	abl	e.			
11	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9					
	0%					
12	TYPE OF	RE	EPORTING PERSON			
	HC, CO					
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1	NAME O	NAME OF REPORTING PERSON				
	GEICO Ir	GEICO Indemnity Company				
2			E APPROPRIATE BOX IF A MEMBER OF A GROUP			
_	(a) ⊠		)			
3	SEC USE	ON	VLY			
	CITIZEN	CII	ID OD DE ACE OF ODC ANIZATION			
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	State of M	lary	rland			
		_	SOLE VOTING POWER			
	MBER OF	_	NONE			
_	HARES	6	SHARED VOTING POWER			
	EFICIALLY NED BY		0 shares of Common Stock			
	EACH	7	SOLE DISPOSITIVE POWER			
REPORTING						
PERSON WITH			NONE			
WIIH 8			SHARED DISPOSITIVE POWER			
			0 shares of Common Stock			
9	AGGREC	AT	E AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON			
			ommon Stock			
10	CHECK I	302	X IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES □			
	Not applie	rabl	e e			
11	Not applicable.  PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9					
		-				
	0%					
12	TYPE OF	RE	EPORTING PERSON			
	IC, CO					
	10,00					

1	NAME OF REPORTING PERSON					
		GEICO Choice Insurance Company				
2			E APPROPRIATE BOX IF A MEMBER OF A GROUP			
	(a) ⊠	(b				
3	SEC USE	ON	NLY			
4	CITIZEN	CLI	IP OR PLACE OF ORGANIZATION			
4	CITIZEN	эп	IF OR PLACE OF ORGANIZATION			
	State of N	ebr	aska			
		5	SOLE VOTING POWER			
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_	MBER OF HARES	6				
	FICIALLY					
	NED BY		0 shares of Common Stock			
EACH REPORTING		7	SOLE DISPOSITIVE POWER			
PERSON			NONE			
WITH		8	SHARED DISPOSITIVE POWER			
9	AGGREG	ΔΤ	0 shares of Common Stock E AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON			
	MOGREO	11 11	E MWOON BENEFICIALLY OWNED BY EACH REPORTING LEAGUN			
			ommon Stock			
10	CHECK E	302	X IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES $\ \Box$			
	Not applic	abl	e.			
11	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9					
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12	I YPE OF	KE	EPORTING PERSON			
	HC, CO					

1	NAME O	NAME OF REPORTING PERSON			
	BNSF Master Retirement Trust				
2	CHECK T (a) ⊠		E APPROPRIATE BOX IF A MEMBER OF A GROUP ) □		
	(a) 🖾	(υ	, <u> </u>		
3	SEC USE	ON	VLY		
4	CITIZEN	SH	IP OR PLACE OF ORGANIZATION		
	State of To	exa	S .		
		5	SOLE VOTING POWER		
NUN	MBER OF		NONE		
SI	HARES	6	SHARED VOTING POWER		
	EFICIALLY NED BY		0 shares of Common Stock		
	EACH ORTING	7	SOLE DISPOSITIVE POWER		
PERSON			NONE		
WITH		8	SHARED DISPOSITIVE POWER		
	0 shares of Common Stock				
9	AGGREG	AT	E AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON		
	0 shares o	f C	ommon Stock		
10	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES □				
	Not applicable.				
11	PERCEN'	ГΟ	F CLASS REPRESENTED BY AMOUNT IN ROW 9		
	0%				
12	TYPE OF	RE	EPORTING PERSON		
	EP				

1	NAME O	NAME OF REPORTING PERSON				
	Berkshire	Berkshire Hathaway Consolidated Pension Plan Master Retirement Trust				
2			E APPROPRIATE BOX IF A MEMBER OF A GROUP			
	(a) ⊠	(D				
3	SEC USE	ON	NLY			
4	CITIZEN	SH	IP OR PLACE OF ORGANIZATION			
1	CITIZEIV	J11	I OKTERCE OF OKOZNIZATION			
	State of D					
		5	SOLE VOTING POWER			
NIIN	MBER OF		NONE			
SI	HARES	6	SHARED VOTING POWER			
	EFICIALLY NED BY		0 shares of Common Stock			
	EACH	7				
REPORTING						
PERSON WITH			NONE			
8 SHARED DISPOSITIVE POWER						
			0 shares of Common Stock			
9	AGGREG	AT	E AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON			
	0 shares o	f C	ommon Stock			
10	CHECK I	302	K IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES $\ \Box$			
	Not applie	ahl				
11	Not applicable.  PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9					
1.0	0%					
12	TYPE OF	RE	EPORTING PERSON			
	EP					

1	NAME O	NAME OF REPORTING PERSON			
	Scott Fetzer Collective Investment Trust				
2	CHECK T (a) ⊠		E APPROPRIATE BOX IF A MEMBER OF A GROUP ) □		
	(a) 🖾	(D	, 🗆		
3	SEC USE	ON	VLY		
4	CITIZEN	SH	IP OR PLACE OF ORGANIZATION		
	State of O	hio			
		5	SOLE VOTING POWER		
NIIN	MBER OF		NONE		
SI	HARES	6	SHARED VOTING POWER		
	EFICIALLY NED BY		0 shares of Common Stock		
	EACH ORTING	7	SOLE DISPOSITIVE POWER		
PERSON			NONE		
7	WITH	8	SHARED DISPOSITIVE POWER		
	0 shares of Common Stock				
9	AGGREG	AT	E AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON		
	0 shares o	f C	ommon Stock		
10	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES □				
	Not applicable.				
11	• • • • • • • • • • • • • • • • • • • •				
	0%				
12	TYPE OF	RE	EPORTING PERSON		
	EP				
ı					

1	NAME O	NAME OF REPORTING PERSON			
		Acme Brick Company Pension Plan			
2	CHECK T (a) ⊠		E APPROPRIATE BOX IF A MEMBER OF A GROUP ) □		
	(a) 🖾	(U	, 🗆		
3	SEC USE	ON	VLY		
4	CITIZEN	SHI	IP OR PLACE OF ORGANIZATION		
	State of To	exa	S		
		5	SOLE VOTING POWER		
NUN	MBER OF		NONE		
SI	HARES	6	SHARED VOTING POWER		
	EFICIALLY NED BY		0 shares of Common Stock		
	EACH PORTING	7	SOLE DISPOSITIVE POWER		
PERSON			NONE		
WITH 8 SHARED DISPOSIT			SHARED DISPOSITIVE POWER		
	0 shares of Common Stock				
9	AGGREG	AT	E AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON		
			ommon Stock		
10	CHECK E	302	X IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES □		
	Not applicable.				
11	PERCEN	ΓŌ	F CLASS REPRESENTED BY AMOUNT IN ROW 9		
	0%				
12	TYPE OF	RE	EPORTING PERSON		
	EP				

1	NAME OF REPORTING PERSON				
	Precision Castparts Corp. Master Trust				
2	CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP				
	(a) ⊠ (b) □				
3	SEC USE ONLY				
4	CITIZENSHIP OR PLACE OF ORGANIZATION				
	State of Overgon				
	State of Oregon  5   SOLE VOTING POWER				
		J	SOLE VOTING POWER		
NIII	MBER OF		NONE		
SHARES		6	SHARED VOTING POWER		
BENEFICIALLY					
OWNED BY			0 shares of Common Stock		
EACH REPORTING		7	SOLE DISPOSITIVE POWER		
PERSON			NONE		
WITH		8	SHARED DISPOSITIVE POWER		
		<u> </u>	0 shares of Common Stock		
9	AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON				
	0 shares of Common Stock				
10	CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES □				
	Not applicable.				
11	PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9				
	0%				
12	TYPE OF REPORTING PERSON				
	EP				

#### Item 1.

#### (a) Name of Issuer

American Airlines Group Inc.

### (b) Address of Issuer's Principal Executive Offices

4333 Amon Carter Blvd, Fort Worth, TX 76155

#### Item 2(a). Name of Person Filing:

## Item 2(b). Address of Principal Business Office:

## Item 2(c). Citizenship:

Warren E. Buffett 3555 Farnam Street Omaha, Nebraska 68131 United States Citizen

National Indemnity Company 1314 Douglas Street Omaha, Nebraska 68102 Nebraska corporation

Government Employees Insurance Company One GEICO Plaza Washington, DC 20076

Maryland corporation

BNSF Master Retirement Trust

c/o BNSF Railway 2650 Lou Menk Drive Fort Worth, TX 76131 Texas corporation

**GEICO Choice Insurance Company** 

One GEICO Plaza Washington D.C. 20076 Maryland corporation

Scott Fetzer Collective Investment Trust c/o Scott Fetzer Co. 28800 Clemens Road Westlake, OH 44145

Delaware corporation

Berkshire Hathaway Inc. 3555 Farnam Street Omaha, Nebraska 68131 Delaware corporation

GEICO Corporation One GEICO Plaza Washington, DC 20076 Delaware corporation

GEICO Advantage Insurance Company

One GEICO Plaza Washington D.C. 20076 Maryland corporation

Acme Brick Company Pension Plan c/o Acme Brick Company 3024 Acme Brick Plaza Fort Worth, TX 76109 Texas corporation

Precision Castparts Corp. Master Trust c/o Precision Castparts Corp. 4650 SW Macadam Ave. Portland, OR 97239 Oregon corporation

Berkshire Hathaway Consolidated Pension Plan Master Retirement

Trust

c/o Berkshire Hathaway Inc. 3555 Farnam Street Omaha, Nebraska 68131 Delaware corporation

#### (d) Title of Class of Securities

Common Stock

## (e) CUSIP Number

02376R102

## Item 3. If this statement is filed pursuant to § 240.13d-1(b), or § 240.13d-2(b) or (c), check whether the person filing is a:

Warren E. Buffett (an individual who may be deemed to control Berkshire Hathaway Inc.), Berkshire Hathaway Inc. and GEICO Corporation are each a Parent Holding Company or Control Person, in accordance with § 240.13d-1(b)(1)(ii)(G).

National Indemnity Company, Government Employees Insurance Company, GEICO Advantage Insurance Company, GEICO Choice Insurance Company and GEICO Indemnity Company are each an Insurance Company as defined in section 3(a)(19) of the Act.

BNSF Master Retirement Trust, Berkshire Hathaway Consolidated Pension Plan Master Retirement Trust, Scott Fetzer Collective Investment Trust, Acme Brick Company Pension Trust and Precision Castparts Corp. Master Trust are each an Employee Benefit Plan in accordance with § 240.13d-1(b)(1)(ii)(F).

## Item 4. Ownership

Provide the following information regarding the aggregate number and percentage of the class of securities of the issuer identified in Item 1.

## (a) Amount beneficially Owned

See the Cover Pages for each of the Reporting Persons.

#### (b) Percent of Class

See the Cover Pages for each of the Reporting Persons.

## (c) Number of shares as to which such person has:

- (i) sole power to vote or to direct the vote
- (ii) shared power to vote or to direct the vote

- (iii) sole power to dispose or to direct the disposition of
- (iv) shared power to dispose or to direct the disposition of

See the Cover Pages for each of the Reporting Persons.

#### Item 5. Ownership of Five Percent or Less of a Class.

If this statement is being filed to report the fact that as of the date hereof the reporting person has ceased to be the beneficial owner of more than 5 percent of the class of securities, check the following [ / ].

#### Item 6. Ownership of More than Five Percent on Behalf of Another Person.

Not Applicable.

# Item 7. Identification and Classification of the Subsidiary Which Acquired the Security Being Reported on By the Parent Holding Company or Control Person.

See Exhibit A.

## Item 8. Identification and Classification of Members of the Group.

See Exhibit A.

#### Item 9. Notice of Dissolution of Group.

Not Applicable.

#### Item 10. Certification.

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired and are held in the ordinary course of business and were not acquired and are not held for the purpose of or with the effect of changing or influencing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having that purpose or effect, other than activities solely in connection with a nomination under § 240.14a-11.

#### **SIGNATURES**

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated this 7th day of May, 2020

/s/ Warren E. Buffett

Warren E. Buffett

BERKSHIRE HATHAWAY INC.

By: /s/ Warren E. Buffett
Warren E. Buffett
Chairman of the Board

NATIONAL INDEMNITY COMPANY, GEICO
CORPORATION, GOVERNMENT EMPLOYEES
INSURANCE COMPANY, GEICO ADVANTAGE
INSURANCE COMPANY, GEICO INDEMNITY
COMPANY, GEICO CHOICE INSURANCE COMPANY,
BNSF MASTER RETIREMENT TRUST, BERKSHIRE
HATHAWAY CONSOLIDATED PENSION PLAN
MASTER TRUST, SCOTT FETZER COLLECTIVE
INVESTMENT TRUST, ACME BRICK COMPANY
PENSION TRUST AND PRECISION CASTPARTS CORP.
MASTER TRUST

By /s/ Warren E. Buffett

Warren E. Buffett Attorney-in-Fact

#### **SCHEDULE 13G**

#### **EXHIBIT A**

## RELEVANT SUBSIDIARIES AND MEMBERS OF FILING GROUP

PARENT HOLDING COMPANIES OR CONTROL PERSONS:

Warren E. Buffett (an individual who may be deemed to control Berkshire Hathaway Inc.)

Berkshire Hathaway Inc.

**GEICO Corporation** 

INSURANCE COMPANIES AS DEFINED IN SECTION 3(a)(19) OF THE ACT:

National Indemnity Company

Government Employees Insurance Company

**GEICO Advantage Insurance Company** 

**GEICO Indemnity Company** 

GEICO Choice Insurance Company

EMPLOYEE BENEFIT PLANS IN ACCORDANCE WITH § 240.13d-1-(b)(1)(ii)(F)

**BNSF Master Retirement Trust** 

Berkshire Hathaway Consolidated Pension Plan Master Trust

Scott Fetzer Collective Investment Trust

Acme Brick Company Pension Plan

Precision Castparts Corp. Master Trust

## **SCHEDULE 13G**

## EXHIBIT B

## JOINT FILING AGREEMENT PURSUANT TO RULE 13d-1(k)(1)

The undersigned persons hereby agree that reports on Schedule 13G, and amendments thereto, with respect to the Common Stock of American Airlines Group Inc. may be filed in a single statement on behalf of each of such persons, and further, each of such persons designates Warren E. Buffett as its agent and Attorney-in-Fact for the purpose of executing any and all Schedule 13G filings required to be made by it with the Securities and Exchange Commission.

Dated: May 7, 2020	/S/ Warren E. Buffett Warren E. Buffett
	Berkshire Hathaway Inc.
Dated: May 7, 2020	/S/ Warren E. Buffett By: Warren E. Buffett Title: Chairman of the Board
	National Indemnity Company
Dated: May 7, 2020	/S/ Marc D. Hamburg By: Marc D. Hamburg Title: Chairman of the Board
	GEICO Corporation
Dated: May 7, 2020	/S/ Todd A. Combs By: Todd A. Combs Title: President
	Government Employees Insurance Company
Dated: May 7, 2020	/S/ Todd A. Combs By: Todd A. Combs Title: President
	GEICO Advantage Insurance Company
Dated: May 7, 2020	/S/ Todd A. Combs By: Todd A. Combs Title: President
	GEICO Indemnity Company
Dated: May 7, 2020	/S/ Todd A. Combs By: Todd A. Combs Title: President, GEICO Corporation

Dated: May 7, 2020

Dated: May 7, 2020

Dated: May 7, 2020

Dated: May 7, 2020

**GEICO Choice Insurance Company** 

/S/ Todd A. Combs

By: Todd A. Combs Title: President

**BNSF Master Retirement Trust** 

/S/ Julie Piggott

By: Julie Piggott

Vice President, Burlington Northern Santa Fe, LLC

Precision Castparts Corp. Master Trust

/S/ Shawn Hagel

By: Shawn Hagel

Title: Executive Vice President, Precision Castparts Corp.

Scott Fetzer Collective Investment Trust

/S/ Robert McBride

By: Robert McBride

Title: President, Scott Fetzer Co.

Dated: May 7, 2020

Dated: May 7, 2020

/S/ Dennis Knautz

By: Dennis Knautz

Title: President, Acme Brick Company

Acme Brick Company Pension Plan

Berkshire Hathaway Consolidated Pension Plan Master Retirement

Trust

/S/ Mark D. Millard

By: Mark D. Millard

Title: Vice president, Berkshire Hathaway Inc.