Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|--------------|---------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-02 | | | | | | | | |

3235-0287 December 31. Expires:

Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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* PURCELL PHILIP J | | | | | | 2. Issuer Name and Ticker or Trading Symbol AMR CORP [AMR] | | | | | | | | | (Che | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
|---|--|--|--|---------|------------------------------|---|---|-----|------------------|--|-----------------|-------|-----------------|-------------------------------|------|---|---|-------------------------------------|--|---------------------------------------|--|
| (Last) | (Last) (First) (Middle) | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/30/2003 | | | | | | | | | Officer (give title below) | | | Other (specify below) | | |
| (Street) | | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | |
| (City) | (Si | tate) (| (Zip) | | | | | | | | | | | | | orm filed by More than One Reporting | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | | Execution Date | | | Code (Instr. 5) | | | | | | | ies For cially (D) Following (I) (| | n: Direct r Indirect istr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Cod | e V | Am | nount | (A) or (D) | | rice | Reporte Transac (Instr. 3 | tion(s) | | | (Instr. 4) | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Dat if any (Month/Day/Yo | Date, 1 | 4. Transa Code (B) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Expirati | 6. Date Exercisab Expiration Date (Month/Day/Year) | | | Amount of | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | у | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | ıble | Expirat Date | ition | Title | Amo or Num of Sha | nber | | | | | | |
| Phantom Stock units ⁽¹⁾ | 0.00 | 06/30/2003 | | | A | | 108 | | 08/08/1 | 988 | 08/08/1 | 1988 | Common stock | 10 | 08 | \$0 | 8,333.68 | 3 | D | | |

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 retirement.

> Philip J. Purcell 07/01/2003 07/01/2003 /s/ Philip J. Purcell

** 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.