FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|-------------------|---------------|------------------|

| OMB APPRO | OVAL | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | |
| 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 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* <u>BACHMANN JOHN W</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol AMR CORP [AMR] | | | | | | | 5. Relationship of Reporting Person (Check all applicable) X Director | | | n(s) to Issu 10% Ow | |
|--|------|------------|---|---|-------|---|--|------------|---|--|---|--|---|--|--|------------------------|--|
| (Last) (First) (Middle) 12555 MANCHESTER ROAD | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/02/2004 | | | | | | | Officer below) | (give title | | Other (specification) | pecify | | |
| (Street) | IS M | 0 | 63131 | | 4. 11 | f Ame | ndment, C | Date o | f Original File | ed (Month/E | ay/Year) | Line | X Form fi | led by One led by More | Reporti | ing Person | |
| (City) | (St | | (Zip) | n Doris | ,ativ | o So. | ourition | | guired, Di | cnocod | of or Do | noficial | ly Ownor | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | action | action 2A. Deemed Execution Date, if any | | 3. 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | ed (A) or | 5. Amou Securitie Beneficia | nt of es ally | Form: I (D) or I | m: Direct or Indirect | 7. Nature of Indirect Beneficial | | | |
| | | | | (Month/Day/Year) | | Code V | Amoun | (A) or (D) | r Price | Owned F Reported Transact (Instr. 3 a | ion(s) | | | Ownership (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 of Exercise Price of Derivative Security (Instr. 3) 3. Transaction Date (Month/Day/Year) (Month/Day/Year) 3A. Deemed Execution Date (Month/Day/Year) (Month/Day/Year) | | Date, | 4. Transaction Code (Instr. 8) | | of E | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | y G | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | |
| Phantom Stock units ⁽¹⁾ | (2) | 02/27/2004 | | | A | | 192.18 | | (3) | (3) | Common stock | 192.18 | (2) | 9,601.2 | 2 | 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.
- 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 Power of Attorney 03/02/2004

** 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.