SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL									
OMB Number:	3235-0287								
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(Street) FORT WORTH TX 76155 (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of Security (Instr. 3) 2. Transaction 2A. Deemed 3. 4. Securities Acquired (A) or 5. Amount of 6. Ownership 7. National Strength	1. Name and Address of Reporting Person* BOREN DAVID L				2. Issuer Name and Ticker or Trading Symbol <u>AMR CORP</u> [AMR]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Street) FORT WORTH TX 76155 (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of Security (Instr. 3) 2. Transaction 2A. Deemed 3. 4. Securities Acquired (A) or 5. Amount of 6. Ownership 7. National States and	. ,	()	(Middle)													
(Street) FORT WORTH TX 76155 X Form filed by One Reporting Person (City) (State) (Zip) Form filed by More than One Reporting Person Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of Security (Instr. 3) 2. Transaction 2A. Deemed 3. 4. Securities Acquired (A) or 5. Amount of 6. Ownership 7. National Security (Instr. 3)				4	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable				
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	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned															
(Month/Day/Year)if any (Month/Day/Year)Code (Instr.5)Beneficially Owned Following(D) or Indirect (I) (Instr. 4)Beneficially Owned			Date		Execution Date, if any	Transaction Code (Instr. 8)		Disposed Of (D) (Instr. 3, 5)		3, 4 and	Securities Beneficially Owned Following Reported	Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial 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 or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		5. Num of Deriva Securi Acquir (A) or Dispos of (D) (Instr. and 5)	tive ties red sed 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)		nd 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	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⁾	\$0 ⁽²⁾	07/20/2009		A		2,610		(3)	(3)	Common Stock	2,610	\$0	31,823.53	D	

Explanation of Responses:

1. Phantom stock units are granted annually pursuant to the Director's Unit Incentive Plan, as amended. The cash value of the units will be distributed upon the director's cessation of service on the Board. 2. The price will be determined upon the Director's cessation of service on the Board.

3. Exercise/expiration dates of Phantom Stock Units are determined upon the Director's cessation of service on the Board.

Remarks:

Kenneth W. Wimberly, Power of Attorney

07/21/2009

** Signature of Reporting Person

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.

Date