Instruction 1(b)

## FORM 5

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

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

# ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	OVAL				
	OMB Number:	3235-0362				
Estimated average burden						
I	hours per response:	1.0				

Form 3	3 Holdings Rep	orted.																
_	4 Transactions		Fil	led pursuant t or Sectio					urities Excha Company A		f 1934							
1. Name and Address of Reporting Person*  SMITH BRUCE M				2. Issuer Name <b>and</b> Ticker or Trading Symbol SMITH A O CORP [ AOS ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner							
(Last) (First) (Middle) A. O. SMITH CORPORATION				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2017								Officer (give title Other (specify below) below)						
112/0 W	11270 WEST PARK PLACE					4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line)					
(Street) MILWAUKEE WI 53224				_									X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(City) (State) (Zip)																	
		Tab	e I - Non-Deri	vative Sec	curiti	es A	cquire	d, D	Disposed	of, or E	eneficia	ally Owne	d					
Date		2. Transaction Date (Month/Day/Year)	Execution I if any	2A. Deemed Execution Date, if any (Month/Day/Year)		nsaction le (Instr.		ecurities Acq D) (Instr. 3, 4		r Disposed	Securities Beneficially Owned at end of		6. Ownership Form: Direct (D) or		7. Nature of Indirect Beneficial Ownership			
								Amo	ount	(A) or (D) Price		Issuer's Year (Ins 4)	Fiscal Indir tr. 3 and (Inst			(Instr. 4)		
Common	ommon Stock											15,8	15,892(1)		D			
Common	n Stock										2,	2,400		I	In Trust <sup>(2)</sup>			
		Ta	able II - Deriva (e.g., p	itive Secu outs, calls								y Owned						
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. Transaction Code (Instr. 8)	of		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. Numbe derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	Ownersh S Form: Direct (D or Indire (I) (Instr.		Beneficial Ownership ect (Instr. 4)			
					(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares							
Restricted Stock Units	\$0						(3)		(3)	Common Stock	0		118,514	4 <sup>(4)</sup>	D			
Class A Common Stock	\$0 <sup>(5)</sup>	12/05/2017		G		365	(6)		(7)	Common Stock	365	\$0	453,59	599 I		In trust <sup>(2)</sup>		
Class A Common Stock	\$0 <sup>(5)</sup>	12/06/2017		G		450	(6)		(7)	Common Stock	450	\$0	453,14	49	I	In trust <sup>(2)</sup>		
Class A	¢n(5)	12/08/2017		G		748	(6)		(7)	Common	748	\$0	452.4	 01		In truct(2)		

#### **Explanation of Responses:**

- 1. Shares deferred under the A. O. Smith Non-qualified Deferred Compensation Plan.
- 2. The reporting person beneficially owns these shares as settlor of a revocable family trust.
- 3. The Plan permits the participant to defer receipt of the award and Mr. Smith has made a deferral.
- 4. The Restricted Stock Units receive a quarterly dividend pursuant to a dividend reinvestment feature of the A. O. Smith Non-qualified Deferred Compensation Plan. The total amount of dividends received was 1,216 units of Restricted Stock Units.
- 5. Gift

Stock

- 6. Convertible at any time into Common Stock.
- 7. None.

### Remarks:

James F. Stern, Attorney-in-Fact for Bruce M. Smith

02/07/2017

\*\* 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.