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

Machinaton	$D \subset$	20540
Washington,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

OMB APPROVAL							
OMB Number:	3235-0362						
Estimated average I	burden						

Form 3	3 Holdings Rep	orted.				U	WINER	(SH	11P					hour	rs per r	esponse:	1.0
Form 4	4 Transactions	Reported.	Fi	led pursuant t or Sectio					urities Excha Company Ad								
1. Name and Address of Reporting Person* Rajendra Ajita G					2. Issuer Name and Ticker or Trading Symbol SMITH A O CORP [AOS]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) A. O. SMITH CORPORATION 11270 WEST PARK PLACE					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2016							X Officer (give title Other (specify below) Chairman and CEO					
(Street) MILWAUKEE WI 53224				4. If Amei	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 Form filed by More than One Reporting Person					
(City)	(5	•	^(Zip) le I - Non-Deri	vative Sec	uriti	es A	cauire	d. D	isposed	of. or E	Benefici	allv	Owne	d			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)			2A. Deemed Execution I	2A. Deemed Execution Date,		a. 3. Transaction Code (Instr.		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)						6. Owner Form (D) or	ership II : Direct B	. Nature of ndirect eneficial wnership	
						(WOIIII/Day		Amo	unt	(A) or (D)	Price		owned a Issuer's I Year (Ins 4)	Fiscal Indire		ect (I) (I	str. 4)
Common	Common Stock 08/12/2016				G		G		234	D	\$0 ⁽¹⁾		144,951		D		
Common Stock 12/09/2016				G		G	3	3,000	D	\$0 ⁽¹⁾		286,902 ⁽²⁾			D		
		T	able II - Deriva (e.g., p	ative Secu outs, calls									wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	se (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)				9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					(A)		Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares						
Employee Stock Options (Right to Buy)	\$0						(3)		(3)	(3) Common Stock				857,240		D	
Restricted	¢0						(4)		(4)	Commor	1 0	Т		07.24	0	D	

Explanation of Responses:

1. Gift

Units

- 2. On October 5, 2016, the common stock of A. O. Smith Corporation split 2-for1, resulting in the reporting person's ownership of 144,951 additional shares of Common Stock.
- 3. On October 5, 2016, the common stock of A. O. Smith Corporation split 2-for1, resulting in the reporting person's ownership of 428,620 additional Employee Stock Options.
- 4. On October 5, 2016, the common stock of A. O. Smith Corporation split 2-for1, resulting in the reporting person's ownership of 48,620 additional Restricted Stock Units.

Remarks:

James F. Stern, Attorney-in-Fact for Ajita G. Rajendra

02/08/2017

** 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.