FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL				
	OMB Number:	3235-0287				
l	Estimated average burd	en				
l	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>Heideman Robert J</u>						2. Issuer Name and Ticker or Trading Symbol SMITH A O CORP [ AOS ]									all applic Directo	cable)	g Pers	son(s) to Iss 10% Ov Other (s	vner		
(Last) A. O. SM CENTER	(Fi MITH CORI R		3. Date of Earliest Transaction (Month/Day/Year) 06/01/2018									below)		below) ef Tech. Officer		er					
12100 WEST PARK PLACE							4. If Amendment, Date of Original Filed (Month/Day/Year)									6. 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) (State) (Zip)																					
		Tab	le I - 1	Non-Deri	vative	Sec	uriti	ies Ad	cquire	d, D	isposed o	of, or B	eneficia	lly C	Owned	l					
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye						2A. Do Execu if any (Mont	ition I		3. Transac Code (Ir 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			Benefic Owned		es ially Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price			orted saction(s) tr. 3 and 4)			(Instr. 4)		
Common Stock 06/01/201						8			М		3,669	A	\$50.10	.16		2,241		D			
Common	Stock			06/01/2	018				S		3,669	D	\$63.761	8 <sup>(1)</sup> 28,572 D							
		Т	able								posed of, , converti			y Ov	vned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	) if any	emed tion Date, n/Day/Year)	4. Transa Code ( 8)			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)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amount or Number of Shares								
Employee Stock Options (Right to Buy)	\$50.16	06/01/2018			M			3,669	(2)		02/13/2027	Commor Stock	3,669		\$0	23,514		D			

## **Explanation of Responses:**

- 1. The price in Column 4 is a weighted average price. The prices actually received ranged from \$63.50 to \$63.91. The reporting person has provided to the issuer, and will provide to any security holder of the issuer, or the SEC staff, upon request, information regarding the number of shares sold at each price within the range for all transactions reported on this Form 4 utilizing an average weighted price.
- 2. The employee stock options were granted on 02/13/2017, under the A. O. Smith Combined Incentive Compensation Plan, a transaction exempt under rule 16b-3. The options became exercisable in three annual installments of 1/3 of the award starting on 02/13/2018.

## Remarks:

James F. Stern, Attorney-in-Fact for Robert J.Heideman

06/01/2018

\*\* 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.