FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL											
OMB Number: 3235-0287											
Estimated average burden											
hours per response:											

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
Name and Address of Reporting Person* Scheppele Stephanie Melissa	2. Issuer Name and Ticker or Trading Symbol SMITH A O CORP [ AOS ]

1. Name and Address of Reporting Person*					suer Name <b>and</b> Ticl					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Scheppele Stephanie Melissa				<u> </u>	IIIIAO CO	KI [ A	103	J		Ι΄.	Director	10% (		
(Last) A. O. SMITH C	(First)	(Middle)	· · · · · · · · · · · · · · · · · · ·	3. Date of Earliest Transaction (Month/Day/Year) 07/13/2023							Officer (give title below)  SVP - CIO		(specify )	
44 VANTAGE WAY					Amendment, Date o	of Origina	l File	d (Month/Day/	Line)	6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) NASHVILLE	TN	37228								X	Form filed by On Form filed by Mo Person			
(City)	(State)	(Zip)		Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									nded to	
	Та	ble I - No	on-Derivat	tive	Securities Acc	quired,	Dis	posed of,	or Be	neficially	Owned			
Date		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	Amount (A) or (D)		Price	Reported Transaction(s) (Instr. 3 and 4)		(111541.4)		
Common Stock 07/13/2				)23		M		2,570	A	\$0 <sup>(1)</sup>	2,570	D		

	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. Transac Code (li 8)		of Deri Sec Acq (A) Disp of (I	oosed D) tr. 3, 4	6. Date Exer Expiration D (Month/Day/	ate	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				
Restricted															1 1

(3)

1,012(2)

D

\$73.325

1,558

D

## **Explanation of Responses:**

(1)

Common Stock

 $1.\ Each\ restricted\ stock\ unit\ represents\ the\ right\ to\ receive,\ at\ settlement,\ one\ share\ of\ Common\ Stock.$ 

07/13/2023

 $2. \ Shares \ withheld \ by \ A. \ O. \ Smith \ Corporation \ to \ satisfy \ tax \ withholding \ requirements \ on \ vesting \ of \ restricted \ stock \ units.$ 

07/13/2023

- 3. The restricted stock units were granted on 07/13/2020 under the A. O. Smith Combined Incentive Compensation Plan, a transaction exempt under Rule 16b-3. The restricted stock units became payable date of 07/13/2023.
- 4. Stephanie Melissa Scheppele beneficially has 6,020 restricted stock units that have not yet vested.

## Remarks:

Units

James F. Stern, Attorney-in-07/17/2023 Fact for Stephanie Melissa <u>Scheppele</u>

2,570

Stock

\*\* Signature of Reporting Person Date

0(4)

D

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.