FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number: Estimated average burden 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

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1. Name and Address of Reporting Person* DasGupta Anindadeb Vjaykumar						2. Issuer Name and Ticker or Trading Symbol SMITH A O CORP [AOS]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>DasGupta Affindadeo v jaykumar</u>									-	-					Directo			10% Ov		
								_						X	below)	(give title		Other (s	specity	
(Last) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year) 06/01/2018								9	Senior Vic	ce Pre	esident		
A. O. SMITH CORPORATION						00/01/2010														
11270 WEST PARK PLACE																				
						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street)														Line) X Form filed by One Reporting Person						
MILWAUKEE		VI	53224											\ \^	_	•		Ü		
					-										Perso		re tnar	n One Repo	rting	
(City)	(;	State)	(Zip)																	
		Tab	le I - No	n-Deriv	vative	e Se	curities	s Ac	quired, I	Disp	osed o	of, or B	enefi	cially	/ Owned	k				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						ar)	2A. Deemed Execution Date, if any (Month/Day/Year		Transaction Disp Code (Instr. 5)		Dispose	ities Acqui d Of (D) (Ir	red (A) str. 3,	or 4 and	5. Amou Securitie Benefici	es	Form (D) o	: Direct r Indirect	7. Nature of Indirect Beneficial Ownership	
							(World // Day/ Tee		, 0,						Reporte	d [(., ((I) (Instr. 4)	(Instr. 4)	
									Code	V	Amount	(A) (D)	or P	rice	Transac (Instr. 3					
			Fabla II	Danissa	.4! (C		A	uniona di Di			an Dar	6: . :	- U	O					
									uired, Di						Owned					
						Can	 	_		_										
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)				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 Beneficial Owned Following Reported Transactio (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amo or Num of Sha	ber						
Employee Stock Options (Right to	\$63.62	06/01/2018			A		4,385		(1)	00	5/01/2028	Common Stock	4,3	85	\$0	4,385		D		

Explanation of Responses:

\$63.62

1. The employee stock options were granted on 06/01/2018 under the A. O. Smith Combined Incentive Compensation Plan, a transaction exempt under Rule 16b-3. The options become exercisable in three annual installments of 1/3 of the award starting on 06/01/2019.

1,035

(2)

2. The restricted stock units were granted on 06/01/2018 under the A. O. Smith Combined Incentive Compensation Plan, a transaction exempt under Rule 16b-3. The restricted stock units become payable in Common Stock on the vesting date of 06/01/2021.

Remarks:

Buy) Restricted

Stock Units

James F. Stern, Attorney-in-Fact for Anindadeb V.

1.035

\$0

06/01/2018

1,035

D

DasGupta

Common

(2)

** 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).

06/01/2018

** 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.