FORM 4

obligations may continue. See

Instruction 1(b).

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* Wheeler Kevin J.						2. Issuer Name and Ticker or Trading Symbol SMITH A O CORP [AOS]										eck all appli Direct	cable) or	g Per	Person(s) to Issuer 10% Owner Other (specify		
(Last) (First) (Middle) A. O. SMITH CORPORATION 500 TENNESSEE WALTZ PARKWAY						3. Date of Earliest Transaction (Month/Day/Year) 02/10/2017										X Officer (give title below) Other (specify below) Senior VP & President and GM					
(Street) ASHLAND CITY TN 37015 (City) (State) (Zip)					4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						ar) i	2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transaction Code (Instr.		4. Securities Acquired (A		A) or	5. Amou Securiti Benefic	unt of 6. ies Feially (E		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
										Code	v	Amount	(A) or (D) Pri		Price	Transac	saction(s) r. 3 and 4)			(Instr. 4)	
Common Stock 02/10/					0/2017	7				M		7,100	(1)	1 5	\$49.80	5 18,	18,774(2)		D		
Common Stock 02/10/					0/2017	7				F		2,020	6 I	D \$49		5 16	16,748		D		
		T	able II -									osed of onverti				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	Date,	4. Transaction Code (Instr. 8)				6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		urity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Own Forn Direc or In (I) (Ir	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exe	e ercisable		xpiration ate	Title	or Nui of	mber ares						
Restricted Stock Units	\$49.86	02/10/2017			М		7,100			(1)		(1)	Commo	7,	100	\$0	10,880 ⁽³	3)	D		
Employee Stock Options (Right to	\$0									(4)		(4)	Commo: Stock	1	0		104,920	0	D		

Explanation of Responses:

1. 7,100 Restricted Stock Units were granted on 02/10/2014, under the A. O. Smith Combined Incentive Compensation Plan, a transaction exempt under Rule 16b-3. 7,100 Restricted Stock Units vested on $02/10/2017. \ As\ a\ result of\ vesting,\ the\ Company\ is\ obligated\ to\ deliver\ 7,100\ shares\ of\ Common\ Stock\ to\ the\ reporting\ person.$

- 2. On October 5, 2016, the common stock of A. O. Smith Corporation split 2-for1, resulting in the reporting person's ownership of 5,837 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 8,990 additional Restricted Stock Units.
- 4. On October 5, 2016, the common stock of A. O. Smith Corporation split 2-for1, resulting in the reporting person's ownership of 52,460 additional Employee Stock Options.

Remarks:

James F. Stern, Attorney-in-Fact for Kevin J. Wheeler ** Signature of Reporting Person

02/13/2017

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.