| SEC Form 4 |
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FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

| OMB Number: | 3235-0287 | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

| 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 | Estimated average burden hours per response: 0.5 | | | |
|--|-------|--|---|-----------------------------|--|--|
| 1. Name and Address of Reporting Person Rajendra Ajita G | on* | 2. Issuer Name and Ticker or Trading Symbol <u>SMITH A O CORP</u> [AOS] | (Check all applicab X Director | 10% Owner | | |
| Last) (First) (Middle) A. O. SMITH CORPORATION 1270 WEST PARK PLACE Street) //ILWAUKEE WI 53224 City) (State) (Zip) | | 3. Date of Earliest Transaction (Month/Day/Year) 07/14/2020 | A below) | below) kecutive Chairman | | |
| | | 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 | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| ······································ | | | | | | | | | | |
|--|--|---|------|---|---|---------------|----------|---|---|---|
| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Ownership |
| | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock | 07/14/2020 | | A | | 2,065 ⁽¹⁾ | A | \$41.975 | 91,212 | D | |
| Common Stock | | | | | | | | 104,001 | Ι | Held by spouse |
| Common Stock | | | | | | | | 168,345 | I | By grantor retained annuity trust - spouse |

| | | | | | | | | | | | | | | spouse |
|--|---|--|---|------------------------------|--|--------|--|--|--|---|------------------------|--|---|---------------------------------------|
| 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. Transa Code (8) | | of Exp | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price o Derivative Security (Instr. 5) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | | | | | | | Amount or Number |] | | |

Date Exercisable

Expiration Date

Explanation of Responses:

1. Payment of prorated retainer in stock under the A. O. Smith Corporation directors' compensation program.

| James F. Stern, Attorney-in- | 07 |
|------------------------------|-----------|
| Fact for Ajita G. Rajendra | <u>07</u> |

of Shares

Title

07/16/2020

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 \ast 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.

Code v

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.

(A) (D)