FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	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 ar <u>Kempk</u>	2. Issuer Name and Ticker or Trading Symbol SMITH A O CORP [ AOS ]											neck al I	tionship of Reporting all applicable) Director		g Per	10% Ov	vner				
(Last) (First) (Middle) A. O. SMITH CORPORATION 11270 WEST PARK PLACE						3. Date of Earliest Transaction (Month/Day/Year) 02/10/2017											Officer (give title below)  Vice President and				еспу
(Street) MILWAUKEE WI 53224						4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S		(Zip)																		
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transa Date (Month/D							A. Dee Executi f any	A. Deemed xecution Date,		3. 4. Secur Transaction Dispose Code (Instr. 5)			of, or Benefic rities Acquired (A) o d Of (D) (Instr. 3, 4 a			or 5. A Sec Ber Ow		Amount of curities uneficially rned Following ported		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
										Code	v	Amount		(A) or (D)	Price	Tr	ransac	u tion(s) and 4)			(11150.4)
Common	Stock		/2017	2017				M		1,830	(1)	A	\$49.8	86 4,		750 <sup>(2)</sup>		D			
Common	Stock		/2017	2017				F		738		D	\$49.8	36	4,012			D			
		Т	able II -	Deriva (e.g., p												/ Ow	ned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deem Executior if any (Month/Da	Date,	4. Transa Code (I 8)		on of			Date Exe piration lonth/Day	Date		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		J Security	Deriv Secu	. Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Da Ex	ate kercisabl		xpiration ate	Title		Amount or Number of Shares						
Restricted Stock Units	\$49.86	02/10/2017			М			1,830		(1)		(1)	Comi		1,830	\$	0	3,690 <sup>(3</sup>	3)	D	
Employee Stock Options (Right to	\$0									(4)		(4)	Comi		0			32,340	)	D	

## **Explanation of Responses:**

- 1. 1,830 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. 1,830 Restricted Stock Units vested on 02/10/2017. As a result of vesting, the Company is obligated to deliver 1,830 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 1,460 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 2,760 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 16,170 additional Employee Stock Options.

## Remarks:

James F. Stern, Attorney-in-Fact for Daniel L. Kempken

02/13/2017

\*\* 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.