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

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

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* KITA JOHN J					2. Issuer Name and Ticker or Trading Symbol SMITH A O CORP [AOS]										(Ch	eck all appli Directo V Officer	ctor er (give title		10% Ov Other (s	vner	
	`	PORATION	_				3. Date of Earliest Transaction (Month/Day/Year) 02/07/2011									X Olificer (give title Other (specify below) Senior V.P., Corp. Fin. & Cont					
(Street) MILWA	reet) ILWAUKEE WI 53224				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line	Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S		(Zip)		<u> </u>	_	.,.								<u> </u>						
D			2. Trans Date (Month/I	action	ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		e, 3.	ransac	4. Securit		ities A	ies Acquired (A) or Of (D) (Instr. 3, 4 a		5. Amount of Securities Beneficially Owned Following		Form: Direct		7. Nature of Indirect Beneficial Ownership		
									С	Code	v	Amount		(A) or (D)	Price	Reporte Transac (Instr. 3	ction(s)			(Instr. 4)	
Common Stock															13,	13,825(1)		D			
		T	able II - [)									sed of onverti				Owned					
1. Title of Derivative Security (Instr. 3)	itle of 2. 3. Transaction 3A. Deemed Execution Date, urity or Exercise (Month/Day/Year) if any		Date,		ansaction of			Expira	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	i lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerc	cisable		opiration	Title	OI N	umber						
Employee Stock Options (Right to Buy)	\$43.115	02/07/2011			A		4,100		((2)	02	2/07/2021	Comr Stoo		4,100	\$0	67,100 ⁰	(3)	D		
Restricted Stock Units	\$43.115	02/07/2011			A		1,600		((4)		(4)	Comr		1,600	\$0	10,750 ⁰	(5)	D		

Explanation of Responses:

- 1. On November 15, 2010, the common stock of A. O. Smith Corporation split 3-for-2, resulting in the reporting person's ownership of 4,608 additional shares of common stock.
- 2. The employee stock options were granted on 02/07/2011 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 02/07/2012.
- 3. On November 15, 2010, the common stock of A. O. Smith Corporation split 3-for-2, resulting in the reporting person's ownership of 21,000 additional employee stock options.
- 4. The restricted stock units were granted on 02/07/2011 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 02/07/2014.
- 5. On November 15, 2010, the common stock of A. O. Smith Corporation split 3-for-2, resulting in the reporting person's ownership of 3,050 additional restricted stock units.

Remarks:

James F. Stern, Attorney-in-Fact for John J. Kita

02/08/2011

** 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.