FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| |

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

| 1. Name and Address of Reporting Person* BROWN RONALD D | | | | | | 2. Issuer Name and Ticker or Trading Symbol SMITH A O CORP [AOS] | | | | | | | | | ationship k all appli Directo | cable) | g Per | son(s) to Iss | |
|--|---|--|--|-------|--|--|-------|------|---|--------|------------------|--|-----------------------------------|----------|---|---|-------|---|---|
| (Last) (First) (Middle) 3 OSPREY LANE | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/11/2011 | | | | | | | | | Officer below) | (give title | | Other (s below) | specify |
| (Street) CINCINNATI OH 45246-472 (City) (State) (Zip) | | | 21 | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Form | 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. Transac Date (Month/Date) | | | | | | Execution Da | | | Code (Instr. | | | | | | 5. Amou Securiti Benefici Owned I Reporte | es Form ially (D) (Following (I) (I | | n: Direct r Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | Code | v | Amount | ount (A) or (D) | | e | Transac | action(s) 3 and 4) | | | (111511.4) | |
| 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. Deeme Execution I if any (Month/Day | Date, | 4. Transactic Code (Inst 8) | | | | 6. Date Exc Expiration (Month/Dat | Date | | Amount of Securities Underlying Derivative Secu (Instr. 3 and 4) | | D Si (li | Price of erivative ecurity nstr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | у | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisabl | | xpiration ate | Title | Amou or Numb of Share | er | | | | | |
| Phantom Stock ⁽¹⁾ | \$42.27 | 04/11/2011 | | | A | | 2,130 | | (2) | | (2) | Common Stock | 2,13 | 0 | \$0 | 4,646 ⁽³⁾ |) | D | |

Explanation of Responses:

- 1. Payment of portion of retainer in Phantom Stock under the A. O. Smith Nonqualified Deferred Compensation Plan based on the market price of the Common Stock on April 11, 2011.
- 2. The Plan permits the participant to defer the receipt of the award, and Mr. Brown has made a deferral.
- 3. On November 15, 2010, the common stock of A. O. Smith Corporation split 3-for-2, resulting in 832 additional shares of Phantom Stock. The Phantom Stock receives a quarterly dividend pursuant to a dividend reinvestment feature of the A. O. Smith Nonqualified Deferred Compensation Plan. The total amount of dividends received was 33 shares of Phantom Stock.

Remarks:

James F. Stern, Attorney-in-Fact for Ronald D. Brown

04/12/2011

** 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.