FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHI	
DIATEMENT OF CHANGES IN BENEFICIAL OWNERSHI	IΡ

l	OMB APPRO	VAL
	OMB Number:	3235-0287
l	Estimated average burde	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 and Address of Reporting Person* SMITH BRUCE M						2. Issuer Name and Ticker or Trading Symbol SMITH A O CORP [AOS]										elationship eck all appl X Direct	icable)		erson(s) to Issuer	
(Last) (First) (Middle) A. O. SMITH CORPORATION							3. Date of Earliest Transaction (Month/Day/Year) 08/08/2012										r (give title)		Other (below)	specify
11270 WEST PARK PLACE					4. If	Ame	endment,	, Date	of Orio	ginal F	iled	(Month/D		Individual or Joint/Group Filing (Check Applicable Line)						
(Street) MILWAUKEE WI 53224																X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	tate)	(Zip)																	
		Tab	le I - Nor	-Deriv	ative	Se	curitie	s Ac	quir	ed, [Disp	osed o	of, or	Bene	ficial	y Owne	d			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		t, Tr	Transaction Di Code (Instr. 5)		Dispose	curities Acquired (A osed Of (D) (Instr. 3,			Benefic Owned	es ially Following	Form (D) o	n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
										ode	v	Amount	ount (A) or P		Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common Stock																3	973		D ⁽¹⁾	
Common	Stock															16	,941		I	In trust ⁽²⁾
		Т	able II - I									sed of				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	I. Transaction Code (Instr.		n of		Expir	ite Exe ration I ith/Day	Date	ble and	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transactic (Instr. 4)	i F Iy [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		xpiration ate	Title	or Nu of	ımber					
Restricted Stock Units ⁽³⁾	\$48.755	08/08/2012			A		62 ⁽³⁾		((4)		(4)	Comm		62	\$0	23,000	(5)	D	
Class A Common	\$0 ⁽⁶⁾								((7)		(8)	Comm		0		118,89	1	I	In trust ⁽²⁾

Explanation of Responses:

- 1. Shares deferred under the A. O. Smith Nonqualified Deferred Compensation Plan.
- 2. The reporting person beneficially owns these shares as settlor of a revocable family trust.
- 3. Payment of portion of retainer in Restricted Stock Units under the A. O. Smith Nonqualified Deferred Compensation Plan.
- 4. The Plan permits the participant to defer receipt of the award, and Mr. Smith has made a deferral.
- 5. The Restricted Stock Units receive 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 80 units of Restricted Stock Units
- 6. 1 for 1
- 7. Convertible at any time
- 8. None

Remarks:

James F. Stern, Attorney-in-Fact for Bruce M. Smith ** Signature of Reporting Person

08/10/2012

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.