FORM 4

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

Instruction 1(b)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5	ATEMENT OF CHANG
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OMB APPROVAL OMB Number: GES IN BENEFICIAL OWNERSHIP

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* JONES PAUL W						2. Issuer Name and Ticker or Trading Symbol SMITH A O CORP [AOS]									k all applic Directo	tionship of Reporting all applicable) Director		10% Ov	ner
(Last) (First) (Middle) A. O. SMITH CORPORATION 11270 WEST PARK PLACE					3. Date of Earliest Transaction (Month/Day/Year) 02/07/2011									X	below)		Other (s below) s. and CEO		pecify
(Street) MILWA		itate)	53224 (Zip)	Doriu		4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check App Line) X Form filed by One Reporting Person Form filed by More than One Report Person											n		
1. Title of Security (Instr. 3)			2. Transaction Date			2A. Deeme Execution if any (Month/Da	ed Date,	3. Transac	tion	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)				5. Amou Securitie Beneficia Owned F	nt of s ally following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	V	Amount	(A) (D)	Price	е	Reported Transact (Instr. 3 a	ion(s)	D			
			Fable II - I						uired, Di , options								<u> </u>	<u> </u>	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	cise (Month/Day/Year) ve	3A. Deemed Execution I if any (Month/Day	Date,	I. Fransaction Code (Instr. 3)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exe Expiration (Month/Day	Date		of Securi Underlyii Derivativ	7. Title and Amount of Securities Inderlying Derivative Security Instr. 3 and 4)		B. Price of Derivative Security Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)
				0	Code	v	(A)	(D)	Date Exercisable		expiration vate	Title	Amour or Number of Shares	er					
Employee Stock Options (Right to Buy)	\$43.115	02/07/2011			A		60,000		(2)	0	2/07/2021	Common Stock	60,00	0	\$0	586,050)(3)	D	
Restricted Stock	\$43.115	02/07/2011			A		23.000		(4)	T	(4)	Common	23.00	0	\$0	133 100	(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 37,158 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 175,350 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 36,700 additional restricted stock units.

Remarks:

James F. Stern, Attorney-in-Fact for Paul W. Jones

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.