Edgar Filing: SMITH A O CORP - Form 4

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Form 4	JCORP										
February 16	, 2016										
FORM	ЛЛ	STATES SI	ECURITIES A	ND EX	CHA	ANGE CO	OMMISSION	OMB AF	PROVAL		
			Washington,					Number:	3235-0287		
Check th if no lon	aar								January 31, 2005		
subject t Section Form 4 o Form 5	STATEN 16. or		CHANGES IN SECUR	RITIES		Estimated a burden hour response	verage				
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940											
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> Lauber Charles T			2. Issuer Name and Ticker or Trading Symbol SMITH A O CORP [AOS]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (A	Middle) 3.	3. Date of Earliest Transaction				(Check an applicable)				
A. O. SMITH CORPORATION, 11270 WEST PARK PLACE			(Month/Day/Year) 02/11/2016				Director 10% Owner Officer (give title Other (specify below) SVP, Strategy & Corporate Dev.				
				Filed(Month/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person 			
MILWAU	KEE, WI 53224						Form filed by Me Person				
(City)	(State)	(Zip)	Table I - Non-I	Derivative	Secu	rities Acqu	ired, Disposed of,	or Beneficial	ly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Da any	3. ate, if Transactio Code Year) (Instr. 8)		sed of		Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	02/11/2016		Code V M	Amount 1,400 (1)	(D) A	Price \$ 63.335	(Instr. 3 and 4) 5 12,597	D			
Common Stock	02/12/2016		S	<u>607 (2)</u>	D	\$ 65.8079	11,990	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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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. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number on Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		Underlying Securities (Instr. 3 and 4)		8. Pr Deriv Secu (Inst
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	\$ 63.335	02/11/2016		М	1,400	<u>(1)</u>	<u>(1)</u>	Common Stock	1,400	(

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Lauber Charles T A. O. SMITH CORPORATION 11270 WEST PARK PLACE MILWAUKEE, WI 53224			SVP, Strate & Corporate Dev.	••			
Signatures							
James F. Stern, Attorney-in-Fact for Lauber	r Charles T.	02/16/	2016				

**Signature of Reporting Person

Explanation of Responses:

- * 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).
- 1,400 Restricted Stock Units were granted on 02/11/2013, under the A. O. Smith Combined Incentive Compensation Plan, a transaction
 (1) exempt under Rule 16b-3. 1,400 Restricted Stock Units vested on 02/11/2016. As a result of vesting, the Company is obligated to deliver 1,400 shares of Common Stock to the reporting person.

Date

(2) The reporting person sold these shares to obtain funds to pay the withholding taxes due as a result of the vesting of the restricted stock units described in footnote (1).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.