Edgar Filing: SMITH A O CORP - Form 4

SMITH A O COI Form 4	RP											
July 16, 2015												
FORM 4									PPROVAL			
Check this box									3235-0287			
if no longer	Expires:	January 31, 2005										
subject to Section 16. Form 4 or	subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Estimated average burden hours per											
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction 1(c) Form 5 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 (C) (C) (C) (C) (C) (C) (C) (C)												
(Print or Type Respo	onses)											
1. Name and Addres GREUBEL WIL	2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer							
SMITH A O CORP [A					-	-	(Check all applicable)					
(Last)	(Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year)X_Director							109	10% Owner			
A. O. SMITH 07/14/2015 CORPORATION, 11270 WEST PARK PLACE					Officer (giv		ner (specify					
Filed(Month/Day/Year) Applicable Line _X_ Form filed							Applicable Line) _X_ Form filed by	Ioint/Group Filing(Check One Reporting Person More than One Reporting				
							Person					
(City) ((State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned			
	ansaction Date hth/Day/Year)	Execution any	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3, 4	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
Reminder: Report on	n a separate line	e for each cl	ass of sec	urities bene	ficially ow	ned directly	or indirectly.					
·	·				Perso inforr requi	ons who res nation cont red to resp ays a curre	spond to the colle tained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)			
	Tab					sposed of, or convertible :	Beneficially Owner securities)	1				

1. Title of	2.	3. Transaction Date	3A. Deemed	4. 5. Nui	nber 6. Date Exercisable and	7. Title and Amount of	8. Price
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactionof	Expiration Date	Underlying Securities	Derivat

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		vd vd		4)	Securit (Instr. :	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units ⁽¹⁾	\$ 67.695	07/14/2015		А	148		(2)	(2)	Common Stock	148	\$ 0

Reporting Owners

Reporting Owner Name / Address		Relationsh				
	Director	10% Owner	Officer	Other		
GREUBEL WILLIAM P A. O. SMITH CORPORATION 11270 WEST PARK PLACE MILWAUKEE, WI 53224	Х					
Signatures						
James F. Stern, Attorney-in-Fact Greubel	um P.	0	7/16/2015			
**Signature of Reporting Po			Date			
Explanation of Responses:						

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).
- Payment of additional retainer in Restricted Stock Units under the A. O. Smith Nonqualified Deferred Compensation Plan based on the (1)market price of the Common Stock on July 14, 2015.
- (2) The Plan permits the participant to defer the receipt of the award, and Mr. Greubel has made a deferral.
- The Restricted Stock Units receive a quarterly dividend pursuant to a dividend reinvestment feature of the A. O. Smith Nonqualfied (3) Deferred Compensation Plan. The total amount of dividends received was 506 units of Restricted Stock Units.

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.