

SMITH A O CORP  
Form 3  
April 04, 2016

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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 * |         | 2. Date of Event Requiring Statement | 3. Issuer Name and Ticker or Trading Symbol                                |  |
| Â Martineau Peter R                       |         | (Month/Day/Year)                     | SMITH A O CORP [AOS]   |  |
| (Last)                                    | (First) | (Middle)                             | 4. Relationship of Reporting Person(s) to Issuer                           | 5. If Amendment, Date Original Filed(Month/Day/Year) |
| A. O. SMITH                               |         | 04/01/2016                           | (Check all applicable)   |  |
| CORPORATION,Â 500                         |         |                                      | <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner       |  |
| TENNESSEE WALTZ                           |         |                                      | <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other |  |
| PARKWAY                                   |         |                                      | (give title below) (specify below)   |  |
| (Street)                                  |         |                                      | Senior Vice President - CIO  |  |
| ASHLAND CITY,Â TNÂ 37015                  |         |                                      | 6. Individual or Joint/Group Filing(Check Applicable Line)                 |  |
| (City)                                    | (State) | (Zip)                                | <input checked="" type="checkbox"/> Form filed by One Reporting Person     |  |
|   |         |                                      | <input type="checkbox"/> Form filed by More than One Reporting Person      |  |

**Table I - Non-Derivative Securities Beneficially Owned**

| 1. Title of Security<br>(Instr. 4) | 2. Amount of Securities Beneficially Owned<br>(Instr. 4) | 3. Ownership Form:<br>Direct (D)<br>or Indirect (I)<br>(Instr. 5) | 4. Nature of Indirect Beneficial Ownership<br>(Instr. 5) |
|------------------------------------|--|---|--|
|------------------------------------|--|---|--|

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

SEC 1473 (7-02)

**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 control number.**

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

| 1. Title of Derivative Security<br>(Instr. 4) | 2. Date Exercisable and Expiration Date<br>(Month/Day/Year) | 3. Title and Amount of Securities Underlying Derivative Security<br>(Instr. 4) | 4. Conversion or Exercise Price of Derivative | 5. Ownership Form of Derivative Security: | 6. Nature of Indirect Beneficial Ownership<br>(Instr. 5) |
|---|---|--|---|---|--|
|---|---|--|---|---|--|

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|                                       | Date Exercisable | Expiration Date | Title        | Amount or Number of Shares | Security | Direct (D) or Indirect (I) (Instr. 5) |   |
|---------------------------------------|------------------|-----------------|--------------|----------------------------|----------|---------------------------------------|---|
| Restricted Stock Units                | Â (1)            | Â (1)           | Common Stock | 2,555                      | \$ 0     | D                                     | Â |
| Employee Stock Options (Right to Buy) | Â (2)            | Â (2)           | Common Stock | 18,240                     | \$ 0     | D                                     | Â |

## Reporting Owners

| Reporting Owner Name / Address  | Relationships |           |                               |       |
|---|---------------|-----------|-------------------------------|-------|
|   | Director      | 10% Owner | Officer                       | Other |
| Martineau Peter R<br>A. O. SMITH CORPORATION<br>500 TENNESSEE WALTZ PARKWAY<br>ASHLAND CITY, TN 37015 | Â             | Â         | Â Senior Vice President - CIO | Â     |

## Signatures

James F. Stern, Attorney-in-Fact for Peter R. Martineau  
Date: 04/04/2016

Signature of Reporting Person

Date

## Explanation of Responses:

\* If the form is filed by more than one reporting person, see Instruction 5(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) Restricted Stock Units were granted under the A. O. Smith Combined Incentive Compensation Plan, a transaction exempt under Rule 16b-3: 915 restricted stock units were granted on 02/10/2014; 730 restricted stock units were granted on 02/09/2015 and 910 restricted stock units were granted on 02/08/2016. The restricted stock units become payable in Common Stock on the vesting date, which is three years after the grant date.

(2) Employee Stock Options were granted under the A. O. Smith Combined Incentive Compensation Plan, a transaction exempt under Rule 16b-3: 2,800 employee stock options were granted on 02/07/2011; 3,200 employee stock options were granted on 02/13/2012; 3,400 employee stock options were granted on 02/11/2013; 2,570 employee stock options were granted on 02/10/2014; 2,620 employee stock options were granted on 02/09/2015; and 3,650 employee stock options were granted on 02/08/2016. Employee Stock Options become exercisable in three annual installments of 1/3 of the award starting one year after the grant date.

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.