FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549	

STATEMENT	OF CH	ANGES IN	BENEFICIAL	OWNEDSHIP
SIAIEMENI		anges in	DENEFICIAL	OWNERSHIP

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden hours per response: 0.5

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box if no longer subject to

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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(0). 00	ee instruction i	<u> </u>																	
	nd Address of <mark>Bryan H</mark>	Reporting Person*									Symbol INC [ES	SE]		(Ched	ck all app	o of Reportir licable)	ng Per	son(s) to Is	ssuer
<u>Sayıcı</u>	<u>Diyan 11</u>				1							•		1	Direc	tor		10% O	wner
,														V		er (give title		Other (s	specify
(Last)	(Fir	st) (N	/liddle)					Trans	action (Month	/Day/Year)				Delov	,		below)	
C/O ESC	O TECHN	OLOGIES INC.			10/3	10/31/2024								CEO & PRESIDENT					
9900 A CLAYTON ROAD																			
2700 II CEMI TOWNOMB					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable							
(Street)					7. " /	Amena	ment,	Date	or Origin	ai i iic	u (Montinba	iy/ i cai	,	Line)	iividuai Oi	301111/0100	b i iiiií	g (Check A	pplicable
ST LOU	IS MO) 6	3124											1	Form	filed by On	e Repo	orting Pers	on
DILOG	10 111	J 0	3121											Form filed by More than One Reporting					
															Perso	on			
(City)	(Sta	ate) (z	Zip)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of S	Security (Inst	r. 3)		2. Transact	ion										7. Nature				
Date (Month/Day			Execution Date, /Year) if any		Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5)			4 and	Securi Benefi			orm: Direct D) or Indirect	of Indirect Beneficial						
			,,	(Month/Day/Year		Year)						Following (i)		str. 4)	Ownership (Instr. 4)				
							Code	v	Amount	(A) c	r p	ice	Transa	ction(s)			(Instr. 4)		
								Jour	Ľ	Amount	(D)	ļ.,		(Instr.	3 and 4)				
Common Stock 10/31/20			024				F		699	D	\$	129.53	33	,540(1)		D			
		Tal	ole II -	Derivati	ve Se	ecurii	ties /	Acau	ired. l	Disp	osed of,	or Be	nefi	cially	Owne	d			
											convertib					-			
1. Title of	2.	3. Transaction	3A. De		4.			ımber			isable and	7. Titl			Price of	9. Number		10.	11. Nature
			Execut	tion Date,		Transaction Code (Instr.		of Derivative		Expiration Date Amount of (Month/Day/Year) Securities				Derivative Security		curity Securities		Ownership Form:	of Indirect Beneficial
(Instr. 3)	str. 3) Price of (Month/Day/Year)		8)			Securities		Underly			rlying		str. 5)	Direct (D)	Ownership				
	Derivative Security						Acquired (A) or Disposed of (D)		Derivativ Security 3 and 4)			rity (In	str.		Following		or Indirect (I) (Instr. 4)		
	-											3 and	3 and 4)			Reported Transaction(s	n(e)		
								(Instr. 3, 4								(Instr. 4)	(3)		
				<u> </u>		and 5)) 											
												Amo		unt					
	l co										Numbe								
			Code V (A)		(D)	Date Exercisable		Expiration Date	of Title Shares		es								
							L`	L`											

Explanation of Responses:

1. Includes 2 shares acquired under Employee Stock Purchase Plan since the reporting person's last Form 4 filing.

Remarks:

Power of Attorney on file

/s/ Jeffrey D Fisher, Attorneyin-Fact

11/01/2024

** 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.