FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO                | DVAL      |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |
| Estimated average burden |           |  |  |  |  |  |  |  |
| hours per response:      | 0.5       |  |  |  |  |  |  |  |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

|   | d Address of   |                        | 2. Issuer Name and Ticker or Trading Symbol ESCO TECHNOLOGIES INC [ ESE ] |                              |                              |  |   |       |  |      |                    | 5. Relationship of Rej<br>(Check all applicable)<br>X Director<br>Officer (give                   |                           |                                       | 10%   | Issuer Owner er (specify   |   |   |   |  |
|---|--|------------------------|---|------------------------------|------------------------------|--|---|-------|--|------|--------------------|---|---------------------------|---------------------------------------|---|--|---|---|---|--|
| (Last) (First) (Middle) C/O ESCO TECHNOLOGIES INC 9900 A CLAYTON ROAD               |  |                        |   |                              |                              | 3. Date of Earliest Transaction (Month/Day/Year) 07/01/2014  |   |       |  |      |                    |   |                           | below) below)                         |   |  |   |   |   |  |
| (Street) ST LOUIS MO 63124  |  |                        |   |                              | 4. If                        | 4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (CLine)  X Form filed by One Reportir  Form filed by More than Original Filed (Month/Day/Year) |   |       |  |      |                    |   |                           |                                       |   |  | eporting Pe   | erson   |   |  |
| (City)  | (31  |                        | Zip)  | on Deriv                     | /ative                       | Sac  | uritic  | ·ς Λς | quired   |      | enosed o           | f or B  | enefic                    | ially Ov                              | mer   | ۸  |   |   |   |  |
| Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day |  |                        |   |                              | ction                        | on 2A. Deemed Execution Date,  |   |       | 3. Transaction Code (Instr. 8) 4. Securitie Disposed C         |      |                    | s Acquir<br>of (D) (Ins   | ed (A) or<br>str. 3, 4 ar | 5. Am<br>Secu<br>Bene<br>Owne<br>Repo | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following<br>Reported |  | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) |   | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|   |  |                        |   |                              |                              |  |   |       | Code   | v    | Amount             | (A) or<br>(D)   | Price                     | (Instr                                | 3 and   | tion(s)<br>and 4)  |   | _   |   |  |
| Common Stock 07/01/20   |  |                        |   |                              |                              | )14  |   | A     |  | 900  | A                  | \$0   | -                         | 32,516                                |   |  | D   | D 14716   |   |  |
| Common Stock Common Stock   |  |                        |   |                              |                              |  |   |       |  |      |                    | +   |                           | +                                     | 100   |  |   |   | By Wife Custodian <sup>(1)</sup>                                  |  |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |                        |   |                              |                              |  |   |       |  |      |                    |   |                           |                                       |   |  |   |   |   |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                                 | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security  | Month/Day/Year) if any |   | med<br>on Date,<br>Day/Year) | 4.<br>Transa<br>Code (<br>8) |  | 5. Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, 4<br>and 5) |       | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |      |                    | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>and 4) |                           |                                       |   | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) |   | 10.<br>Ownershi<br>Form:<br>Direct (D)<br>or Indirec<br>(I) (Instr. 4 | Beneficial<br>Ownership<br>t (Instr. 4)                           |  |
|   |  |                        |   |                              | Code                         | v  | (A)   | (D)   | Date<br>Exercis  | able | Expiration<br>Date | Title   | Number<br>of<br>Shares    |                                       |   |  |   |   |   |  |

## **Explanation of Responses:**

1. Custodian for minor grandchild

## Remarks:

Power of Attorney on file

J. D. Fisher, Attorney-in-fact 07/01/2014

\*\* 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.