FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| ngton, D.C. 20549 | | | |
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| OMB APPROVAL | | | | | | | | | |
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| l | OMB Number: | 3235-0287 | | | | | | | |

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| Estimated average burde | en |
| 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

| 1. Name and Address of Reporting Person* STOLZE JAMES M | | | | | 2. Issuer Name and Ticker or Trading Symbol ESCO TECHNOLOGIES INC [ESE] | | | | | | | (Cl | Relationship o eck all applica X Director | able) | Perso | on(s) to Issue | | |
|--|------|------------------|---|-------|--|---|-----------------------------------|--------|--|---|--|---|--|--|---|----------------|---------------------|--------|
| (Last) (First) (Middle) C/O ESCO TECHNOLOGIES INC. | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/19/2019 | | | | | | | | Officer (below) | give title | | Other (sp below) | pecify |
| 9900 A CLAYTON ROAD | | | | | 4.1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) ST. LOUIS MO 63124 | | | | _ | | | | | | | - 1 | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (Sta | ate) | (Zip) | | | | | | | | | | | | | | | |
| | | Tal | ole I - Non | -Deri | vativ | /e Se | curities | Ac | quired, | Dis | posed o | f, or Be | neficial | y Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | /Day/Year) i | | 2A. Deemed Execution Date, if any (Month/Day/Year | | Transaction Disposed Code (Instr. | | ties Acquired (A) o I Of (D) (Instr. 3, 4 a | | Beneficia Owned Fo | Form (D) o ollowing (I) (In | | Direct Ir Indirect B str. 4) | . Nature of ndirect seneficial ownership | | | |
| | | | | | | Code | v | Amount | (A) or (D) | Price | Transacti | Reported Transaction(s) (Instr. 3 and 4) | | (1 | nstr. 4) | | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| | | Transa Code (| ansaction Derivative ode (Instr. Securities | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and of Securitic Underlying Derivative (Instr. 3 and | | | ies g Security | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securities Beneficial Owned Following Reported Transactio | e s Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | Amount or Number of Shares | | (Instr. 4) | on(s) | | |
| Common Stock Equivalents | (1) | 07/19/2019 | | | A | | 18.2359 | | (1) | | (1) | Common Stock | 18.235 | \$82.42 | 18,805.7 | 758 | D | |

Explanation of Responses:

1. Common Stock Equivalents issued in lieu of cash dividends on the Common Stock Equivalents held by the director on the record date. Each Common Stock Equivalent is the economic equivalent of one share of common stock. The Common Stock Equivalents become payable in common stock upon, or at the election of the reporting person in installments beginning upon, the termination of the reporting person's service as

Remarks:

Power of Attorney on file

J. D. Fisher, Attorney-in-fact 07/23/2019

** 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.