SEC Form 3 FORM 3

## UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

## **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

3235-0104

Estimated average burden hours per response: 0.5

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

	ddress of Repo nristopher	5	Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 04/19/2021 3. Issuer Name and Ticker or Trading Symbol ESCO TECHNOLOGIES INC [ESE]						
(Last) ESCO TEC	ast) (First) (Middle) SCO TECHNOLOGIES INC				4. Relationship of Reporting Issuer (Check all applicable) Director	Person(s)	wner	5. If Amendment, Date of Original Filed (Month/Day/Year)		
9900 A CLAYTON ROAD					Officer (give title below) X Sr. Vice Presider	Other ( below)	(specify (Cl	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person		
(Street) ST LOUIS	МО	63124			Si, vice riesider	n œ Gre	,		by More than One Person	
(City)	(State)	(Zip)								
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)				E	2. Amount of Securities Beneficially Owned (Instr. I)			I. Nature of Indirect Beneficial Dwnership (Instr. 5)		
No securities are beneficially owned					0	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
		2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Se Underlying Derivative Se (Instr. 4)		4. Conversion or Exercise	Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
		Date Exercisable	Expiration Date		Amount Derivativ or Security Number of Shares		Direct (D) e or Indirect (I) (Instr. 5)			
Explanation of	Responses:									

**Remarks:** 

Power of Attorney on file

Jeffrey D. Fisher, Attorney-In-Fact \*\* Signature of Reporting Person

04/19/2021

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 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).

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.

OMB APPROVAL

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