\square

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| OMB APPRO | VAL |
|-------------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average burde | en |
| hours per response: | 0.5 |

| 1. Name and Address of Reporting Person* <u>MCCONNELL JAMES M</u> | | | 2. Issuer Name and Ticker or Trading Symbol <u>ESCO TECHNOLOGIES INC</u> [ESE] | | ationship of Reporting P < all applicable) Director | erson(s) to Issuer 10% Owner | |
|--|---------|-------|---|-------------------|---|---------------------------------|--|
| (Last) (First) (Middle) C/O ESCO TECHNOLOGIES INC | | () | 3. Date of Earliest Transaction (Month/Day/Year) 09/01/2011 | | Officer (give title below) | Other (specify below) | |
| 9900 A CLAYTON ROAD | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) | vidual or Joint/Group Filing (Check Applicable | | |
| (Street) | | | | X | Form filed by One Re | eporting Person | |
| ST LOUIS | МО | 63124 | | | Form filed by More th Person | nan One Reporting | |
| (City) | (State) | (Zip) | | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | Transaction Code (Instr. | | 4. Securities Disposed Of | | | 5. Amount of Securities Beneficially Owned Following Reported | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|------------|---|-----------------------------|---|------------------------------|---------------|-------------------------------|---|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (iiisti: 4) |
| Common Stock | 09/01/2011 | | S | | 2,000 | D | \$30.53 ⁽¹⁾ | 19,140 | D | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of Deriv Secu Acqu (A) of Dispo of (D) (Instr | of Expiration | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | Amount of | | Amount of Securities Underlying Derivative Security (Instr. 3) | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|------------------------------|---|--|---------------|---------------------|--|-------|--|--|--|--|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | | | |

Explanation of Responses:

1. Weighted average price is \$30.53. Sold in multiple transactions with a price-range \$30.47-30.57. The reporting person will provide, upon request, to the Commission staff, the Issuer, or any security holder of the Issuer, full information regarding the number of shares sold at each separate price.

Remarks:

T. B. Martin, Attorney In-Fact 09/06/2011

** 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.