FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

igtori, D.C. 20549	OMB APPROVAL

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

5. Relationship of Reporting Person(s) to Issuer

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

2. Issuer Name and Ticker or Trading Symbol

Name and Address of Reporting Person* Ostria Sergio J					2. Issuer Name and Ticker or Trading Symbol ICF International, Inc. [ICFI]						(Ch	eck all applic	cable) or	:	10% Owner Other (specify below) ice President	
(Last) 9300 LEE	(First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 03/08/2019							helow)	Officer (give title below) Executive Vi			
(Street) FAIRFAX VA 22031 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table	e I - Non-D	erivative	Securities	s Acc	quirec	l, Di	sposed of	f, or Bei	neficial	y Owned				
1. Title of Security (Instr. 3)			Date	ansaction th/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)			4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a) Securitie Benefici Owned F	eficially led Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	ect lirect E	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3	ion(s)			Instr. 4)
Common			03	/08/2019		N			5,665	A	\$40.68	3 15	858	D		
Common			03	/08/2019			M		3,398	A	\$27.00	19,256		D		
Common 0			03	/08/2019			S		3,398	D	\$75.02	\$75.02 ⁽¹⁾ 15		D		
Common 03/08/2				/08/2019			S		5,665	D	\$75.02	(1) 10	10,193			
		Ta	ıble II - De (e.ç		ecurities calls, warr							Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	Code (ative rities ired r	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	erivative derivative security Securities		nership m: ect (D) ndirect Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

\$40.68

\$27.03

Nonqualified

Stock

Options Nonqualified

Stock

Options

1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$74.9804 to \$75.17, inclusive. The reporting person undertakes to provide to ICF International, Inc., any security holder of ICF International, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote

Date

Exercisable

(2)

(3)

Expiration

03/17/2024

03/18/2023

Title

Common

Commor

Date

2. Represents options under the terms of the 2010 Omnibus Incentive Plan of which the options vested in three equal annual installments beginning on March 17, 2015.

Code ν

3. Represents options under the terms of the 2010 Omnibus Incentive Plan of which the options vested in three equal annual installments beginning on March 18, 2014.

/s/ James E. Daniel, Attorney-

Amount Number

Shares

5,665

3,398

\$0.0000

\$0.0000

03/12/2019

Transaction(s) (Instr. 4)

0.0000

0.0000

D

D

in-fact

** 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).

03/08/2019

03/08/2019

** 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.

of (D) (Instr. 3, 4

and 5)

(A) (D)

5,665

3.398