FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL 3235-0287 OMB Number: 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

Name and Address of Reporting Person* Ostria Sergio J						2. Issuer Name and Ticker or Trading Symbol ICF International, Inc. [ICFI]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 9300 LEE HIGHWAY						3. Date of Earliest Transaction (Month/Day/Year) 03/11/2021									X Officer (give title below) Other (specify below) Executive Vice President				specify	
(Street) FAIRFAX VA 22031 (City) (State) (Zip)					- 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Form f	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(5		,	n-Deriv	/ative	Se	curiti	ies Ad	nuired	Die	nosed (of or F	lenef	iciall	v Owner	1				
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					action	ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Trans	3. 4. Transaction Di Code (Instr. 5)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			5. Amou Securiti Benefic Owned	nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
										v	Amount	(A) (D)	or P	rice	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common					03/11/2021						585	I	1	\$0 ⁽¹⁾	14	,173		D		
Common				03/1	03/11/2021				М		253	· A	A	\$0 ⁽¹⁾	14	,426		D		
Common				03/1	03/11/2021				F		85	I) !	\$90.1 1	l 14	14,341		D		
Common 03/11					1/2021	2021			F		195	I) !	\$90.11	l 14	,146		D		
Common 03/12/					2/2021	/2021					1,07	6 <i>A</i>	A	\$0 ⁽²⁾	15	15,222		D		
Common 03/12/2					2/2021	2021		F		359	I) 9	\$92.65	5 14,863			D			
		Т	able II -								osed of				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	ed Date,	4. Transaction Code (Instr 8)		5. Number of		6. Date Exercisa Expiration Date (Month/Day/Yea		sable and e	7. Title a Amount Securiti Underly Derivati	7. Title and Amount of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Ownership	Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nu of	mber ares						
Restricted Stock Units	(1)	03/11/2021			М			253	(3)		(3)	Commo	n 2	53	(1)	6,803		D		
Restricted Stock Units	(1)	03/11/2021			M			585	(3)		(3)	Commo	n 5	85	(1)	6,218		D		
Restricted Stock	(2)	03/12/2021			М			1,076	(4)		(4)	Commo	n 1,	076	(2)	5,142		D		

Explanation of Responses:

- 1. The exercise price for the restricted stock unit exercise was \$90.11.
- 2. The exercise price for the restricted stock unit exercise was \$92.65.
- 3. Represents the 2nd vesting anniversary (25%) of acquired restricted stock units granted pursuant to the 2018 Omnibus Incentive Plan, as amended.
- 4. Represents the 3rd vesting anniversary (50%) of acquired restricted stock units granted pursuant to the 2010 Omnibus Incentive Plan, as amended.

/s/ James E. Daniel, Attorney-03/15/2021 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).
- ** 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.