SEC Form 3 FORM 3

## UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

## OMB APPROVAL

3235-OMB Number: 0104

0.5

Estimated average burden

hours per response:

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

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 <sup>*</sup> Broadus Barry M			2. Date of E Requiring S (Month/Day 02/28/202	itatement /Year)	3. Issuer Name <b>and</b> Ticker or Trading Symbol <u>ICF International, Inc.</u> [ ICFI ]						
(Last) 9300 LEE H	(First) HIGHWAY	(Middle)			4. Relationship of Reporting Issuer (Check all applicable) Director		Person(s) to 10% Owner		<ol> <li>5. If Amendment, Date of Original Filed (Month/Day/Year)</li> <li>6. Individual or Joint/Group Filing</li> </ol>		
(Street) FAIRFAX (City)	VA (State)	22031 (Zip)			X Officer (give title below) Chief Financial		Other (specify below) I Officer		(Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person		
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4) (D) or Ind (I) (Instr.		rship 4. Nature of Indirect Beneficial irect Ownership (Instr. 5) direct				
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)					5. Ownership Form:	Ownership (Instr.
		Date Exercisable	Expiration Date	N N Of		Amount or Number of Shares	Derivativ Security	ve	Direct (D) or Indirect (I) (Instr. 5)	5)	

**Explanation of Responses:** 

No securities are beneficially owned.

## /s/ James E. Daniel. Attorney-in-fact

02/28/2022

Date

\*\* Signature of Reporting Person

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.