FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
-------------	------	-------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours ner resnons	e· 0.5								

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

Name and Address of Reporting Person* Datar Srikant M.					2. Issuer Name and Ticker or Trading Symbol ICF International, Inc. [ICFI]									5. Relationship of Reporting Person(s) to Issue (Check all applicable) X Director 10% Owner							
(Last) 1902 RE	(Fir	st) (I	Middle)			ate of E		Trans	nsaction (Month/Day/Year)						Office below	tle	e Other (spec below)		pecify		
(Street) RESTON (City)	N VA		20190 Zip)		4. If A										6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
Date			2. Transaction Date (Month/Day/	Execution Date,		<i>'</i>			4. Securities Disposed Of 5)			nd	5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	(A) or (D)	Price		Transactio (Instr. 3 ar				(III)	,	
Common 03/06/2				03/06/20)23	23			S		382	D	\$11	4	2,42	2,425		D			
Common												6,851		51	I		LegacyCap LLC				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
Derivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any				Transaction of Code (Instr. Deriv		itive ities red sed	Expiration I (Month/Day		ate	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price o Derivative Security (Instr. 5)		9. Numb derivativ Securitic Benefici Owned Followir Reporte Transac (Instr. 4)	ve Owner Form: Direct or Indi (I) (Insect ction(s)		hip D) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
Fundamentia					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares	r							

Explanation of Responses:

/s/ James E. Daniel, Attorney-

in-fact

** Signature of Reporting Person

Date

03/07/2023

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} 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).