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								

0.5

hours per response:

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

					01 (Jeou	011 00(11)	or tire		ciii Oc	mpany Act	01 10-10							
Name and Address of Reporting Person* Wasson John						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				
wusson som															Office	er (give title			
(1 A) (Finel) (Aiddle)					3 [3. Date of Earliest Transaction (Month/Day/Year)							1	X belov			Other (specify below)		
(Last) (First) (Middle)						06/30/2013								President and COO					
ICF INTERNATIONAL, INC.																			
9300 LEE HIGHWAY				4 16	A If Amandment Date of Original Filed (Marsh / Day No.)									6. Individual or Joint/Group Filing (Check Applicable					
					- 4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line)				
(Street) FAIRFA	X VA	`	22031												X Form	filed by One	e Reporting Pers	son	
FAIRFA	A. VI	1 2	22031														re than One Rep	orting	
(City)	(St	ate) (Zip)												Pers	on			
		Tabl	le I - No	on-Deriv	/ative	Se	curitie	s Ac	quired	I, Di	sposed o	f, or I	3ene	ficial	lly Owne	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)					Execution Date,		Transaction Disposed C			es Acquired (A) o Of (D) (Instr. 3, 4 a			5) Securi Benefi	cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A) (D)	or Pr	ice	Transa	action(s) 3 and 4)		(111501.4)		
Common Stock (ESPP) ⁽¹⁾ 06/30/20.					2013(2))13 ⁽²⁾		A		659	A	\$	29.81	(3) 5	0,376	D			
Common Stock															4	9,717	D		
		Та	able II -								osed of, convertib				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution if any	Execution Date, If any		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)	derivative Securities	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amor or Numl of Share	er					

Explanation of Responses:

- 1. The reporting person is voluntarily reporting the acquisition of shares of the issuer's common stock pursuant to the ICF International, Inc. 2006 Employee Stock Purchase Plan (the "ESPP"), for the ESPP purchase period of January 1, 2013 through June 30, 2013. This transaction is also exempt pursuant to Rule 16b-3(c).
- 2. The Offering Period (as defined in the ESPP) ended on June 30, 2013, and the shares were acquired on the last day of the Offering Period.
- 3. In accordance with the ESPP, these shares were purchased at a price not less than ninety-five percent (95%) of the per share fair market value of the Common Shares as of June 28, 2013, the last trading day prior to the end of the Offering Period.

/s/ James J. Maiwurm, Attorney-in-fact 07/02/2013

** 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.