Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

	OMB APPROVAL											
	OMB Number:	3235-0287										
	Estimated average burden											
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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* Wasson John					ICF International, Inc. [ICFI]										ationship of Reportir call applicable) Director		10% O		wner
(Last) 9300 LE		3. Date of Earliest Transaction (Month/Day/Year) 04/06/2020									Office below	er (give title v) CEO &	Presi	Other (below)					
(Street) FAIRFAX VA 22031 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)								i. Indiv ine) X	idual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table	I - N	on-Deriva	tive S	Secui	rities	Ac	quire	d, Di	sposed o	f, or E	Benefic	ially	Own	ed			
Date				2. Transaction Date (Month/Day/	Execution /Year) if any		eemed tion Date, n/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			d 5)	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		Transa	usaction(s) tr. 3 and 4)			(1115411-4)
Common 04/				04/06/20	20			S ⁽¹⁾		976	D	\$66.8	3 ⁽²⁾	83,554			D		
Common				04/06/20	20	.0			S ⁽¹⁾		3,770	D	\$67.6	18 ⁽³⁾	79,784			D	
		Tal	ble II	- Derivati (e.g., pເ						, ,	oosed of, convertib			•	Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Exercise ce of rivative curity (Month/Day/Year) if any (Month/Day/Year) Code (Instr. 8)				of	r osed) r. 3, 4	Expir	ate Exer ration C ath/Day		7. Titl Amou Secur Unde Deriv Secur 3 and	unt of rities rlying ative rity (Instr. 4)	Der Sec (Ins	rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exer	cisable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on 03/05/2020.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$66.345 to \$67.34, 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 footnotes (2) and (3) to this Form 4.
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$67.375 to \$68.31, 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 footnotes (2) and (3) to this Form 4.

/s/ James E. Daniel, Attorney-

04/08/2020

** 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.