SEC	Form 4	
-----	--------	--

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number:	3235-0287
Estimated average bu	rden
hours per response:	0.5

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

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 [*] 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)				
			,,,,,,,,	X	Director	10% Owner			
(Last)	(Last) (First) (Middle)		3. Date of Earliest Transaction (Month/Day/Year)	x	Officer (give title below)	Other (specify below)			
9300 LEE HIGHWAY			03/11/2021		CEO & President				
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi Line)	6. Individual or Joint/Group Filing (Check Applicable Line)				
FAIRFAX	VA	22031		X	Form filed by One Re	porting Person			
(City)	(State)	(Zip)	—		Form filed by More than One Reporting Person				

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

4		•			-					
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 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	Transaction(s) (Instr. 3 and 4)		(11301.4)
Common	03/11/2021		М		2,168	A	\$0 ⁽¹⁾	77,273	D	
Common	03/11/2021		М		1,523	A	\$0 ⁽¹⁾	78,796	D	
Common	03/11/2021		F		687	D	\$90.11	78,109	D	
Common	03/11/2021		F		978	D	\$90.11	77,131	D	
Common	03/12/2021		М		3,663	A	\$0 ⁽²⁾	80,794	D	
Common	03/12/2021		F		1,653	D	\$92.65	79,141	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	(c.g., puts, cans, warrants, options, convertible securities)														
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		n of		6. Date Exerc Expiration D (Month/Day/	ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Restricted Stock Units	(1)	03/11/2021		М			1,523	(3)	(3)	Common	1,523	(1)	33,624	D	
Restricted Stock Units	(1)	03/11/2021		М			2,168	(3)	(3)	Common	2,168	(1)	31,456	D	
Restricted Stock Units	(2)	03/12/2021		М			3,663	(4)	(4)	Common	3,663	(2)	27,793	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.

<u>/s/ James E. Daniel, Attorney-</u> in-fact

03/15/2021

** Signature of Reporting Person Date

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

 \ast 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.