**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’
   Croan Gerald
   
   ICF INTERNATIONAL, INC.
   9300 LEE HIGHWAY
   FAIRFAX VA 22031

2. Issuer Name and Ticker or Trading Symbol
   ICF International, Inc. [ICFI]

3. Date of Earliest Transaction (Month/Day/Year)
   01/28/2008

4. If Amendment, Date of Original Filed
   01/29/2008

5. Relationship of Reporting Person(s) to Issuer
   X 10% Owner
   EVP

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

<table>
<thead>
<tr>
<th>1. Title of Security (Instr. 3)</th>
<th>2. Transaction Date (Month/Day/Year)</th>
<th>2A. Deemed Execution Date, if any (Month/Day/Year)</th>
<th>3. Transaction Code (Instr. 8)</th>
<th>4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)</th>
<th>5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</th>
<th>6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</th>
<th>7. Nature of Indirect Beneficial Ownership (Instr. 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Common Stock</td>
<td>01/28/2008</td>
<td></td>
<td>S</td>
<td>3,000 D</td>
<td>39,400 D</td>
<td>D</td>
<td>36,400 D</td>
</tr>
<tr>
<td>Common Stock</td>
<td>01/28/2008</td>
<td></td>
<td>S</td>
<td>2,000 D</td>
<td>$26 34,400 D</td>
<td>D</td>
<td></td>
</tr>
</tbody>
</table>

Explanation of Responses:
1. Gerald Croan 10b5-1 Trading Plan. These shares were sold pursuant to Rule 10b5-1 Trading Plan dated November 28, 2007.

Remarks:
Amendment being made to correct the amount of shares sold on 1/28/2008 pursuant to a 10b5-1 trading plan.

Judith Kassel
01/31/2008

** 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 4 (b)(v).


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.