FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinatan	D C	20540	
Nashington,	D.C.	20049	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
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).

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* <u>Datar Srikant M.</u>					2. Issuer Name and Ticker or Trading Symbol <u>ICF International, Inc.</u> [ICFI]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner									
(Last) (First) (Middle) 1902 RESTON METRO PLAZA						3. Date of Earliest Transaction (Month/Day/Year) 11/25/2022									Officer (give title Other (specify below) below)							
(Street) RESTON (City)	N VA		0190 Zip)		4. If <i>i</i>											Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
		Table	I - No	on-Deriva	tive	Secur	ities A	cqu	uired	l, Dis	sposed of	, or B	enefic	cial	ly Own	ed						
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)					Execution Date,		Tr C			Disposed Of	Securities Acquired (A) or posed Of (D) (Instr. 3, 4 a					6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
								C	Code V		Amount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common 11/25/2				11/25/20)22				S		361	D	\$112	2	3,189		D					
Common													6,851		I		LegacyCap LLC					
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
1. Title of Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security Date (Month/Day/Year) Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) Execution Date, if any (Code (Instr. 8) Transaction Code (Instr. 8) Security (A) or Dispo of (D) (Instr.				Derivativ Securitie Acquired (A) or Dispose	re (Expiration Date (Month/Day/Year) Securiti Underly Derivati Security 3 and 4				nt of ities lying itive ity (Instr.	S (I	. Price of Derivative Security Instr. 5)	9. Numb derivativ Securitic Benefici Owned Followir Reporte Transac (Instr. 4)	ve es ially Director Inc. ing (I) (Inc. ition(s)		hip D) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A) (D		Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares									

Explanation of Responses:

/s/ James E. Daniel, Attorney-

11/28/2022

in-fact

** 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.