FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| | | |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPROVAL | | | | | | | | | |
|---|------------------------|-----------|--|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | | |
| l | Estimated average burd | en | | | | | | | | |
| l | 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* Glover Ellen (Last) (First) (Middle) ICF INTERNATIONAL, INC. 9300 LEE HIGHWAY | | | | | | | Issuer Name and Ticker or Trading Symbol ICF International, Inc. [ICFI] Date of Earliest Transaction (Month/Day/Year) 03/31/2011 | | | | | | | | | | | o of Reporting Pe licable) tor er (give title v) EVP | | rson(s) to Iss 10% O Other (below) | wner |
|--|--|--|--|-------|---|-----------------------|---|---|---|----------------|----------------------------|----------------|---|--|--|------------|--|--|--|--|--|
| (Street) FAIRFA | | tate) (| 22031 (Zip) | | , | Line) X Form filed by | | | | | | | | | | | | filed by One filed by Mor n | nt/Group Filing (Check Applicable d by One Reporting Person d by More than One Reporting | | |
| 1 Title of 6 | Coourity (Inc | | le I - Noi | | | | | | ÷ | | Disp | | | | | lly (| 5. Amou | | 6.0 | wnership | 7. Nature |
| Date | | | | Date | | | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | | , Transaction Code (Instr. | | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | | ies ies ially Following | Form: Direct (D) or Indirect (I) (Instr. 4) | | of Indirect Beneficial Ownership |
| | | | | | | | (| | ĺ | Code | v | Amount | | (A) or (D) | Price | \exists | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) |
| Common | Stock | | | | | | | | | | | | | | 22 | | 2,200 | | D | | |
| Common Stock 03/31/ | | | | | | 2011 | | | | M | | 972 | 2 | A | \$20. | \$20.54 | | 23,172 | | D | |
| Common Stock 03/31/ | | | | | /2011 | | | | | F | | 323 | 3 D \$ | | \$20. | .54 22,849 | | 2,849 | D | | |
| | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Day | Date, | 4. Transactior Code (Instr. 8) | | | | 6. Date Exercisal Expiration Date (Month/Day/Year | | | | 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4) | | | Der Sec | Price of ivative curity str. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | ly [| 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exe | e ercisable | | piration te | Title | 1 | Amount or Number of Shares | | | | | | |
| Restricted Stock Units | \$20.54 | 03/31/2011 | | | M | | | 972 | | (1) | | (1) | Comn | | 972 | | \$0 | 2,916 | | D | |

Explanation of Responses:

1. Represents first vesting anniversary (25%) of acquired restricted stock units granted pursuant to the 2006 Long-Term Equity Incentive Plan.

/s/ James J. Maiwurm, 04/04/2011 Attorney-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.