Reiff Isabel S. Form 4 April 05, 2011

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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 OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person * Reiff Isabel S.

> (First) (Middle)

9300 LEE HIGHWAY

(Last)

(City)

1.Title of

Security

(Instr. 3)

Common

Stock

(Street)

(State)

(Zip)

(Month/Day/Year) Execution Date, if

(Month/Day/Year)

2. Transaction Date 2A. Deemed

FAIRFAX, VA 22031

2. Issuer Name and Ticker or Trading Symbol

ICF International, Inc. [ICFI]

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

04/01/2011

4. If Amendment, Date Original

Filed(Month/Day/Year)

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

3. 4. Securities

> Code Disposed of (D)

TransactionAcquired (A) or (Instr. 3, 4 and 5) (Instr. 8)

(A) or

Code V Amount (D) Price

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

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 control number.

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

OMB APPROVAL

OMB 3235-0287 Number:

January 31, Expires: 2005

Estimated average burden hours per

response... 0.5

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner X_ Officer (give title

Other (specify below) below)

Executive Vice President

6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

D

Person

5. Amount of

Securities

Owned Following

Reported

Transaction(s)

(Instr. 3 and 4)

Beneficially

6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I)

(Instr. 4) (Instr. 4)

Ownership

SEC 1474 (9-02)

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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. Transact Code (Instr. 8)	5. Number fowf Derivative Securities Acquired (A) or Disposed of	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount Underlying Securitie (Instr. 3 and 4)	
	Security				(D) (Instr. 3, 4, and 5)				
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amour or Number of Shares
Restricted Stock Units	(1)	04/01/2011		A	4,167	(2)	(2)	Common Stock	4,16
Non-Qualified Stock Option	\$ 21.77	04/01/2011		A	9,882	(3)	04/01/2021	Common Stock	9,88

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Reiff Isabel S.

9300 LEE HIGHWAY Executive Vice President

FAIRFAX, VA 22031

Signatures

/s/ James J. Maiwurm,
Attorney-in-fact
04/05/2011

**Signature of Reporting Person Date

Explanation of Responses:

- * 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).
- (1) Each restricted stock unit is the economic equivalent of one share of ICF International, Inc.'s Common Stock.
- (2) These acquired restricted stock units were granted pursuant to the 2010 Omnibus Incentive Plan. These restricted stock units vest over a period of 4 years at 25% per year beginning one year from the date of grant.
- (3) This option award was granted pursuant to the 2010 Omnibus Incentive Plan. The option award will vest over a period of 3 years at 33 1/3% per year beginning one year from the date of grant.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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