FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vvaoriirigiori,	D.O.	200-0

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPROVAL								
OMB Number:	3235-0362							
Estimated average burden								
hours per response:	1.0							

Form 3 Holdings Reported.

X Form 4 Transactions Reported.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

				or Section	on 30(h)	of the	Investr	ment C	ompany Act	of 1940								
1. Name and Address of Reporting Person* CHRYSTIE THOMAS L					2. Issuer Name and Ticker or Trading Symbol CONSUMER PORTFOLIO SERVICES							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
CHILIDIE HIOWIGE			INC [INC [CPSS]							X	Director			10% Owner			
(Last) (First) (Middle) P.O. BOX 640					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2004								Officer (give title below)			Other (specify below)		
(Street) WILSON WY 83014				4. If Ame	4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(City) (State) (Zip)					Form filed by More than One Reporting Person													
		Tab	le I - Non-Deri	vative Sed	curitie	s Ac	quire	d, Di	sposed o	of, or E	Benefici	ally	Owned					
Date (Month/Day/Year)		2A. Deemed Execution I if any (Month/Day	Date,	3. Transaction Code (Instr.		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)			r Disposed	Securi Benefi		ies Owne		ship I Direct I	. Nature of ndirect Beneficial Ownership	rect eficial		
						(Monthibay) real)		Amou	nt (A) or D) Price		;	Issuer's Fi Year (Instr. 4)	iscal Indired		ct (I) (Instr. 4)		
		٦	Table II - Deriva (e.g.,	ative Secu puts, calls									wned					
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. Transaction Code (Instr. 8)			ate	7. Title Amoun Securit Underly Derivat (Instr. 3	t of ies /ing ive Securit	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownersl Form: Direct (I or Indire (I) (Instr.	Benef Owne ct (Instr.	lirect ficial rship		
					(A)	(D)	Date Exerci	isable	Expiration Sable Date		Amour or Number of Shares	er						
Stock Option (right to buy)	\$4	04/26/2004		4A	10,000		04/26/	/2005	04/26/2014	Commo Stock			(1)	10,0	00	D		

Explanation of Responses:

1. Issued in consideration of the named person's service as director of the issuer.

Thomas L. Chrystie

02/11/2005

** 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.