(City)

(State)

1. Name and Address of Reporting Person* **LEICHTMAN LAUREN B**

(Zip)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Ob - + + +
Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden response: 0.5

7. Nature of Indirect Beneficial Ownership (Instr. 4)

11. Nature of Indirect Beneficial Ownership (Instr. 4)

U obligati	ons may conti tion 1(b).			Fil							rities Exchanç company Act o		1934			hour	s per	response:	0
1. Name and Address of Reporting Person* LEVINE LEICHTMAN CAPITAL PARTNERS INC				<u>C(</u>	2. Issuer Name and Ticker or Trading Symbol CONSUMER PORTFOLIO SERVICES INC [CPSS]									5. Relationship of Reporti (Check all applicable) Director Officer (give title below)			X 10% (Owner (specify	
(Last) (First) (Middle) 335 N. MAPLE DRIVE SUITE 240					3. Date of Earliest Transaction (Month/Day/Year) 09/25/2013									belo			Below	,	
(Street) BEVERLY HILLS CA 90210				- 4. l	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)																
		Tab	le I - N	on-Deri	vative	Sec	curitie	es Ac	quire	d, Di	sposed o	f, or B	enefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)					Execut (Year) if any		ution Date,		action Instr.	4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 a			d 5) Secu Ben Own		mount of urities eficially led Following orted		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indired Beneficia Ownersh (Instr. 4)	
									Code	v	Amount	(A) or (D)			Trans	action(s) . 3 and 4)			, ,
Common	Stock			09/25/	2013				S		18,372	D	\$5.70)35(1)	1,	167,613		D ⁽²⁾	
		Ta	able II								oosed of, o				wned	l			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any			Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		e Exer tion D h/Day/		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)				10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownersh (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date		Amount or Number of Shares						
		Reporting Person* ITMAN CAF		PARTI	NERS														
(Last) 335 N. M. SUITE 2	IAPLE DR 40	(First)	(M	liddle)															
(Street) BEVERI	Y HILLS	CA	90)210															
(City)		(State)	(Z	ip)															
1	d Address of E ARTH	Reporting Person*	•																
(Last) 335 N. M SUITE 2	IAPLE DR 40	(First) IVE	(M	liddle)															
(Street) BEVERI	Y HILLS	CA	90)210															

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335 N. MAPLE DR	IVE							
SUITE 240								
00112 2 10								
(Stroot)								
(Street) BEVERLY HILLS	CA	90210						
DEVEKLY HILLS	CA	90210						
(City)	(State)	(Zip)						
		(17						
1. Name and Address of								
Levine Leichtman Capital Partners IV, L.P.								
,								
(Last)	(First)	(Middle)						
335 N. MAPLE DR	IVE							
SUITE 240								
3011E 240								
(Ctt)								
(Street) BEVERLY HILLS	CA	90210						
DEVERLY HILLS	CA	90210						
,								
(City)	(State)	(Zip)						
1. Name and Address of	f Reporting Person*							
LLCP Partners 1								
EEGI Turtifeis I	<u> </u>							
(Last)	(First)	(Middle)						
335 N. MAPLE DR	•	(
	IVE							
SUITE 240								
(Stroot)								
(Street) BEVERLY HILLS	$C\Delta$	90210						
DEVEKLY HILLS	CA	50210						
(City)	(State)	(Zip)						
(5)	(510.10)	(

(First)

(Middle)

Explanation of Responses:

(Last)

1. Represents the weighted average sales price for a number of sale transactions effected at prices ranging from \$5.67 to \$5.76. The Reporting Person has provided to the issuer, and undertakes to provide upon request by the SEC staff, or any security holder of the issuer, information regarding the number of shares sold at each separate price within the range.

2. This Form 4 is being filed by more than one reporting person. Levine Leichtman Capital Partners IV, L.P. (the "Partnership") is the direct beneficial owner of the securities described above. LLCP Partners IV GP, LLC (the "General Partner") is the sole general partner of the Partnership. Levine Leichtman Capital Partners, Inc. ("Capital Corp.") is the sole manager of the General Partner. Arthur E. Levine is a director and shareholder of, and the President of, Capital Corp. Lauren B. Leichtman is a director and shareholder of, and the Chief Executive Officer of, Capital Corp. Each of the General Partner, Capital Corp., Mr. Levine and Ms. Leichtman may be deemed to be an indirect beneficial owner of the equity securities reported herein and disclaims beneficial ownership of such equity securities except to the extent of his, her or its indirect pecuniary interest therein.

> By: /s/ Steven E. Hartman for Steven E. Hartman, Vice President, on behalf of Levine Leichtman Capital Partners, Inc., the sole manager of LLCP 09/27/2013 Partners IV, L.P., which is the sole general partner of Levine Leichtman Capital Partners IV, By: /s/ Steven E. Hartman for Steven E. Hartman, Vice President, on behalf of Levine 09/27/2013 Leichtman Capital Partners, Inc., the sole manager of LLCP Partners IV, L.P. By: /s/ Steven E. Hartman for Steven E. Hartman, Vice President, on behalf of Levine 09/27/2013 Leichtman Capital Partners, 09/27/2013 By: /s/ Arthur E. Levine

By: /s/ Lauren B. Leichtman 09/27/2013 ** Signature of Reporting Person Date

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

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.

^{*} 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).