FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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

OWD / W I I	COVIL					
OMB Number: 3235-028						
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hours per response:	0.5					

	tion 1(b).	ide. See		File							ies Exchan			934		liour	s per response.	0.5
1. Name and Address of Reporting Person*  SECOND CURVE CAPITAL LLC				2. Iss CO	2. Issuer Name and Ticker or Trading Symbol CONSUMER PORTFOLIO SERVICES INC [ CPSS ]												to Issuer % Owner her (specify	
(Last) (First) (Middle) 350 5TH AVENUE, SUITE 4730						3. Date of Earliest Transaction (Month/Day/Year) 08/14/2017								below) below)				
(Street) NEW Y(			10118 (Zip)		4. If A	Ame	ndment,	Date o	of Origina	l Filed	d (Month/Da	ay/Ye	ar)		ne)	fual or Joint/Grou Form filed by Or Form filed by Mo Person	ne Reporting F	Person
(City)	(5	•		n Doriv	rativo	S01	ouritio	s A 6	auirod	Dic	nocod o	of 0	Por	oficia	ally O	hwood		
Table I - Non-Derivativ  1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye				ection	2A. Deemed Execution Date,			3. Transaction Code (Instr. 8)		4. Securities Acquired (A)			d (A) or	d 5)	5. Amount of Securities Beneficially Dwned Following	6. Ownersh Form: Direc (D) or Indire (I) (Instr. 4)	of Indirect ect Beneficial Ownership	
							Code	v	Amount	(	A) or D)	Price	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock, no par value			08/14/2017					S		5,000	D		\$3.94	452	2,274,884 <sup>(1)</sup>	I	By advisory clients of Second Curve Capital, LLC	
Common Stock, no par value			08/15/2017					S		10,000		D	\$3.97	771	2,264,884 <sup>(1)</sup>	I	By advisory clients of Second Curve Capital, LLC	
		Ta									osed of, onvertib				y Ow	ned		
Derivative Conversion Date Ex Security Or Exercise (Month/Day/Year) if a		3A. Deen Executio if any	ned n Date,	4. Transac Code (In 8)	tion	5. Number ion of		6. Date Exerci Expiration Da (Month/Day/Yo		sable and te	7. Ti Amo Sec Und Deri Sec	7. Title and Amount of Securities Underlying Derivative Security (In and 4)		8. Pric Deriva Securi (Instr.	tive derivative ity Securities	Owners Form: Direct (I or Indire (I) (Instr	Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nu of	ımber				
		Reporting Person* VE CAPITAL	LLC															
(Last) 350 5TH	AVENUE,	(First) SUITE 4730	(Mid	ldle)														
(Street)  NEW YO	ORK	NY	101	.18														

(Last)	(First)	(Middle)	
350 5TH AVENU	UE, SUITE 4730		
(Street)			
NEW YORK	NY	10118	
(City)	(State)	(Zip)	
1. Name and Addres	ss of Reporting Person	n <sup>*</sup>	
DKOWN III	OWAS IX		
(Last)	(First)	(Middle)	
		TIC	
C/O SECOND C	CURVE CAPITAL	, LLC	

(Street) NEW YORK	NY	10118	
(City)	(State)	(Zip)	

## **Explanation of Responses:**

1. These securities may be deemed to be beneficially owned by Second Curve Capital, LLC and Thomas K. Brown. Second Curve Capital, LLC is the investment manager of Second Curve Partners, LP, Second Curve Partners II, LP, Second Curve Partners II, LP, Second Curve Partners II, LP, Second Curve Vision Fund, LP, Second Curve Vision Fund, LP, Second Curve Vision Fund International, Ltd. Thomas K. Brown is the managing member of Second Curve Capital, LLC. Each such Reporting Person disclaims beneficial ownership of the reported securities except to the extent of his or its pecuniary interest therein, and this report shall not be deemed an admission that such Reporting Person is the beneficial owner of the securities for purposes of Section 16 of the Securities Exchange Act of 1934, as amended, or for any other purpose.

Second Curve Capital LLC,

By: /s/ Thomas K. Brown, 08/16/2017

Managing Member

<u>/s/ Thomas K. Brown</u> <u>08/16/2017</u>

\*\* 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.