FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

4		0	<i>_</i> ,,,			V,	~	<u> </u>	,
	Was	shinato	n D	C. 20	1549				

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL										
OMB Number: 3235-0287										
Estimated average burden										
hours per response: 0.8										

defense	ed to satisfy the e conditions of ee Instruction 1	Rule 10b5-																	
1. Name ar	2. Issuer Name and Ticker or Trading Symbol CONSUMER PORTFOLIO SERVICES,								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner										
-	INC. [ CPSS ]								1		er (give title		Other (s						
(Last) 3800 HO 1400	3. Date of Earliest Transaction (Month/Day/Year) 11/12/2024							Exec. Vice President											
(Street)	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)											
LAS VEGAS NV 89169													1	Form filed by More than One Reporting					
(City)	City) (State) (Zip)														Perso	on			
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	juired,	Dis	posed of	, or E	Benefi	cially	/ Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						Execution Day/Year) if any		cution Date,				es Acquired (A) Of (D) (Instr. 3,		4 and Securi Benefi Owned		ially Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) (D)	or Pri	се		ted action(s) 3 and 4)			(Instr. 4)
Common Stock, No Par Value 11/12/2						024 s 10,000 D		\$1	0.16	203,656			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)	rivative Conversion Date Execution Date curity or Exercise (Month/Day/Year) if any		tion Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis Expiration Date (Month/Day/Yea		ate	7. Title and Amount of Securities Underlying Derivative Security (In 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	Code V (A) (D)		Date Exercis	able	Expiration able Date		Amount or Number of Shares	er						

**Explanation of Responses:** 

/s/ Christopher Terry

11/14/2024

\*\* Signature of Reporting Person Da

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).