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(h)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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

1. Name and Address of Reporting Person*  CREATURA MARK  (Last) (First) (Middle)  3800 HOWARD HUGHES PKWY						Issuer Name and Ticker or Trading Symbol     CONSUMER PORTFOLIO SERVICES     INC [ CPSS ]      Date of Earliest Transaction (Month/Day/Year)     08/07/2015								neck all appli Directo	elationship of Reporting Person(s) to Issuer eck all applicable)  Director 10% Owner   X Officer (give title below)  Sr. Vice President			
(Street) LAS VE	S VEGAS NV 89169 (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)  tive Securities Acquired, Disposed of, or Benefic								6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person  Cially Owned				
1. Title of Security (Instr. 3) 2. Tra					saction /Day/Ye	n ear)	2A. De Execu if any		3. Trans	3. Transaction Code (Instr.		ities Acquir	ed (A) or	5. Amou Securitie Benefici	nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) o (D)	Price	Transaci (Instr. 3	tion(s)			(
common stock, no par value 08/07						/2015			М		10,00	0 A	\$1.0	3 291	291,400		D	
common stock, no par value 08/0					7/201	7/2015					7,200	0 A	\$1.2	2 298	298,600		D	
common stock, no par value 08/					7/201	7/2015					20,00	0 A	\$1.5	318	318,600		D	
		-	Table II -								osed of,			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	ate, Transa Code (I		of Deri Sec Acq (A) o Disp	umber ivative urities uired or posed D) (Instr. and 5)	6. Date Exercisal Expiration Date (Month/Day/Year		e	of Securit Underlyin Derivative	T. Title and Amount of Securities Underlying Perivative Security Instr. 3 and 4)		9. Numbe derivative Securities Beneficia Owned Following Reported Transactie (Instr. 4)	Ownershi Form: Direct (D) or Indirect (I) (Instr.	Ownership	Beneficial Ownership t (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares	ber				
Stock Option (right to buy)	\$1.03	08/07/2015			M			10,000	(1)		06/03/2021	Common Stock, no par value	10,000	(2)	10,00	0	D	
Stock Option (right to buy)	\$1.2	08/07/2015			M			7,200	(3)		04/03/2022	Common Stock, no par value	7,200	(2)	14,40	0	D	
Stock Option	\$1.5	08/07/2015			M			20,000	(4)		12/30/2015	Common Stock, no	20,000	(2)	0		D	

## **Explanation of Responses:**

buy)

- 1. Became or becomes exercisable in cumulative installments of 10,000 shares each on June 3 of 2012, 2013, 2014, 2015 and 2016.
- 2. Issued in consideration of the named person's services to the issuer.
- 3. Became or becomes exercisable in cumulative installments of 7,200 shares each on April 3 of 2013, 2014, 2015, 2016 and 2017
- 4. Became or becomes exercisable in cumulative installments of 40,000 shares on June 10, 2010 and of 10,000 shares on December 30, 2010.

/s/ Mark Creatura 08/11/2015

\*\* 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.