FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

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* <u>Straten Laurie</u>						2. Issuer Name and Ticker or Trading Symbol CONSUMER PORTFOLIO SERVICES INC [CPSS]									ck all applic	,		son(s) to Issuer 10% Owner Other (specify		
(Last) (First) (Middle) 3800 HOWARD HUGHES PKWY						3. Date of Earliest Transaction (Month/Day/Year) 11/23/2015									X Officer (give title Offier (specify below) Sr. Vice President					
(Street) LAS VEGAS NV 89169 (City) (State) (Zip)					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tak	le I - Nor	ı-Deri\	vativ	e Se	curit	ies Ac	quired,	Disp	osed o	f, or Be	nefic	ially	Owned					
Date					ate Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispo		rities Acquired (A) o ed Of (D) (Instr. 3, 4 a			5. Amour Securitie Beneficia Owned F Reported	s ally ollowing	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) (D)	r Pr	ice	Transaction(s) (Instr. 3 and 4)				(instr. 4)	
common stock, no par value 11/23/							2015				10,00	10,000 A		\$1.5	35,	35,250		D		
			Table II -						uired, D , option						Owned			,		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,		ransaction Code (Instr.		umber vative urities uired or oosed O) (Instr. and 5)	6. Date Ex Expiration (Month/Da	Date		7. Title ar of Securi Underlyir Derivativ (Instr. 3 a	ties ig e Secu		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e S Illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	Amo or Num of Shar	ber						
Stock Option (right to	\$1.5	11/23/2015			M			10,000	12/30/200	5 1	2/30/2015	Common Stock, no par value	10,0	000	(1)	0		D		

Explanation of Responses:

1. Issued in consideration of the named person's services to the issuer.

/s/ Laurie Straten

11/25/2015

** 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.