FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D C	20540
wasiiiigton,	D.C.	20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response.	0.5								

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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1. Name and Address of Reporting Person* TERRY CHRIS					<u>C0</u>	2. Issuer Name and Ticker or Trading Symbol CONSUMER PORTFOLIO SERVICES, INC. [CPSS]								eck all applic Directo	cable)	g Person(s) to Is 10% C		
(Last) 3800 HO	,	irst) JGHES PARKW	(Middle) 'AY, SUIT		3. Date of Earliest Transaction (Month/Day/Year) 05/02/2023								X below)					
(Street) LAS VEGAS NV 89169				4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(S	tate)	(Zip)		Rı	Rule 10b5-1(c) Transaction Indication												
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												
		Tab	le I - Noi	n-Deriv	/ative	e Se	curit	ties Ac	quired	, Dis	posed o	f, or Be	neficial	y Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				Execution D			Transaction Disposed O		ies Acquired (A) or Of (D) (Instr. 3, 4 and			es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
										v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3	tion(s)			(Instr. 4)
Common Stock, no par value 05/02/				/2023		M		60,00	60,000 A		7 200	200,605		D				
Common Stock, no par value 05/02				2/2023				F ⁽¹⁾		48,512 П		\$10.6	2 152,093			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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Day if any (Month/Day/	Date,	4. Transa Code (I 8)				6. Date Exercisa Expiration Date (Month/Day/Yea		e	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D or Indirect (I) (Instr.	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares					
Stock Option (right to buy)	\$7.97	05/02/2023			М			60,000	(2)		05/07/2023	Common Stock, No Par Value	60,000	(3)	0		D	

Explanation of Responses:

- 1. Represents a "net exercise" of outstanding stock options. The reporting person received 11,488 shares of common stock on net exercise of option to purchase 60,000 shares of common stock. The reporting person forfeited 48,512 shares of common stock underlying the option in payment of the exercise price and tax liability, using the closing stock price on May 2, 2023 of \$10.62 per share.
- 2. Became exercisable in cumulative increments of 12,000 shares on May 7, 2014, 2015, 2016, 2017, and 2018.
- 3. Issued in consideration of the named person's services to the issuer.

/s/ Chris Terry

05/04/2023

** 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.