FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* KERREY J ROBERT | | | | | 2. Issuer Name and Ticker or Trading Symbol GENWORTH FINANCIAL INC [GNW] | | | | | | | | | tionship of R all applicabl Director | | erson(| s) to Issuer | ner |
|---|--|--|---|--|--|---------------------|--|-------------------|--|---|--|-------|-------------------------------|---|--|-----------------|--|--|
| (Last) | (First) | (1 | Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 10/27/2006 | | | | | | | | Officer (gi below) | ve title | | Other (s below) | pecify | |
| C/O GENWORTH FINANCIAL, INC. 6620 WEST BROAD STREET | | | | 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 | | | | | | | | |
| (Street) RICHMOND | VA | 2 | 3230 | | | | | | | | | | | Form filed | d by More t | than O | ne Reportino | g Person |
| (City) | (State | ·) (2 | Zip) | | | | | | | | | | | | | | | |
| | | Т | able I - Non | ı-Deriv | ative | Securi | ies Ac | quired, | Disp | osed o | f, or Ben | efici | ally Ow | ned | | | | |
| Date | | | | 2. Trans Date (Month/I | | Execu ar) if any | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Dispo | | ities Acquire d Of (D) (Ins | | | and 5) Securities Beneficiall Following | | Form: | Direct (D) lirect (I) 4) | 7. Nature of Indirect Beneficial Ownership |
| | | | | | | | | Code | v | Amount (A) or (D) | | Price | Transaction (Instr. 3 and | str. 3 and 4) | | | (Instr. 4) | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | |
| Derivative Conversion Da | | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | Cod | Transaction Code (Instr. | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported | | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Cod | le V | (A) | (D) | Date Exercisal | | Expiration Date | Title | N | mount or umber of nares | | Transaction (Instr. 4) | on(s) | | |
| Deferred Stock Units | (1) | 10/27/2006 | | A | | 33.16 | 9 | (1) | | (1) | Class A Common Stock | | 3.1679 | (2) | 12,449.00 | 041 | D | |

Explanation of Responses:

- 1. Deferred Stock Units become payable in cash (based on the cash value of a share of Class A Common Stock) beginning one year after termination of service as a director. The Reporting Person may elect to receive such amount as a lump sum or in payments spread out for up to 10 years.
- 2. Additional Deferred Stock Units acquired represent dividend equivalents of \$1,117.43 reinvested at \$33.69 per share of Class A Common Stock.

/s/ Richard J. Oelhafen, Jr., Attorney-in-Fact

** 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.