OMB APPROVAL

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

| Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940 |
|--|
| Name and Address of Reporting Person* |
| Kelly S. Kirkpatrick One Rockefeller Plaza, Suite 1430 New York, NY 10020 |
| Date of Event Requiring Statement |
| March 8, 2002 |
| 3. I.R.S. Identification Number of Reporting Person, if an entity (voluntary) |
| 4. Issuer Name and Ticker or Trading Symbol |
| Harris & Harris Group, Inc. (TINY) |
| 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |
| [X] Director [] 10% Owner [] Officer (give title below) [] Other (specify below) |
| 6. If Amendment, Date of Original (Month/Year) |
| NA |
| 7.Individual or Joint/Group Filing (Check Applicable Line) |
| [X] Form filed by One Reporting Person |
| [] Form filed by More than One Reporting Person |
| Table I - Non-Derivative Securities Beneficially Owned |
| 1. Title 2. Amount of 3. Ownership 4. Nature of Indirect of Security Form: Beneficial Ownership Security) Beneficially Direct (D) (Instr. 5) (Instr. 4) Owned or Indirect (I) (Instr. 4) (Instr. 5) |
| -0- |

| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |
|--|
| 1. Title of 2. Date Exercisable 3. Title And 4. Conversion of Derivative and Expiration Amount of Exercise Price of Security Date Underlying Derivative (Instr.3) (Month/Day/Year) Securities Security (Instr.3 and 4) |
| Date Amount or Exer- Expiration Number of cisable Date Title Shares |
| |
| NOT APPLICABLE |
| 5. Ownership Form 6. Nature of Indirect of Derivative Beneficial Ownership Security (Instr.5) Direct (D) or Indirect (I) (Instr. 5) |
| NOT APPLICABLE |
| Explanation of Responses: |
| /s/Kelly S. Kirkpatrick March 28, 2002 |

/s/Kelly S. Kirkpatrick March 28, 2002

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

^{**}Signature of Reporting Person Date

^{**}Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).