# FORM 4

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

OMB APP	ROVAL					
OMB Number:	3235-0287					
Estimated average burden						
hours per respor	ise 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 OF SECURITIES

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

Print or Ty	pe Response	s)														
1. Name and Address of Reporting Person * ROBERTS JAMES E					2. Issuer Name and Ticker or Trading Symbol HARRIS & HARRIS GROUP INC /NY/ [TINY]						TINY	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) 111 WEST 57TH STREET, SUITE 1100					3. Date of Earliest Transaction (Month/Day/Year) 12/31/2003							Officer	(give title belo	w)	Other (specify b	elow)
(Street) NEW YORK, NY 10019			4. If	4. If Amendment, Date 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					
(City) (State) (Zip)				))	Table I - Non-Derivative Securities Acqui						uired, Dispo	ired, Disposed of, or Beneficially Owned				
(Instr. 3) Date			y/Year) Exect		if (	Code (Instr. 8)		(A) or Disposed of (D) (Instr. 3, 4 and 5)			Beneficially Owned Following Reported Transaction(s)			Ownership o Form:	7. Nature of Indirect Beneficial	
				(Mon	Month/Day/Year)	ar)	Code	v	Amount	(A) or (D)	Price	Ì	(Instr. 3 and 4)			,
Common	Stock		12/31/200	)3			P		422	A	\$ 12.17	16,233			D	
Reminder: 1 indirectly.	Report on a	separate line		ss of securities				Per con the	sons whatained i	n this i	form a a curi	o the colle are not req rently valid	uired to re d OMB cor	spond unl	ess	EC 1474 (9- 02)
	_				uts, calls,										2   10	
1. Title of Derivative Security (Instr. 3)	tive Conversion Date Execution Date, if Transaction of and Expiration I Code Derivative (Month/Day/Year)		d Expiration Date onth/Day/Year) Am Un Sec		mount of nderlying	Derivative	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownersl Form of Derivati Security Direct (I or Indire	Ownership (Instr. 4)							
					Code	V (	(A) (D)		te ercisable	Expirat Date	tion Ti	Amount or the Number of Shares				

### **Reporting Owners**

Describer Occurs Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
ROBERTS JAMES E 111 WEST 57TH STREET SUITE 1100 NEW YORK, NY 10019	X						

### **Signatures**

	ı	
/s/ James E. Roberts		12/31/2003
**Signature of Reporting Person		Date

#### **Explanation of Responses:**

- \* 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.

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.