# FORM 4

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

OMB APP	ROVAL
DMB Number:	3235-0287
Estimated averag	ge burden
ours per respon	se 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

1 37															
1. Name and Address of Reporting Person * PRESSMAN LORI D			2. Issuer Name <b>and</b> Ticker or Trading Symbol HARRIS & HARRIS GROUP INC /NY/ [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) 08/31/2005						Officer (give title below) Other (specify below)					
(Street) NEW YORK, NY 10019			4. If A	4. If Amendment, Date Original Filed(Month/Day/Year)					t)	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					s Acqui	ired, Disposed of, or Beneficially Owned					
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	any	tion Date, if	f Code (Instr. 8)		(A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	Beneficially Owned Following Reported Transaction(s)		Following (s)	Ownership Form:	7. Nature of Indirect Beneficial	
				(Montr	h/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 a	nstr. 3 and 4)		Direct (D) Owners or Indirect (Instr. 4 (I) (Instr. 4)	
Common	Stock		08/31/2005			P		550	A	\$ 11.48	5,543			)	
	Report on a	separate line f	or each class of sec	urities b	eneficially	owned dire	ectly o	r							
Reminder: indirectly.	Report on a	separate line f	Table II -	Derivati	ive Securiti	es Acquir	Pers cont the f	sons wh tained ir form dis	n this fo splays a of, or Be	orm are a curre eneficial	e not req ntly valid	uired to re d OMB cor	formation spond unle strol numbe	ss	C 1474 (9- 02)
indirectly.		`	Table II -	Derivati	ive Securiti	es Acquir	Pers cont the t	sons wh tained ir form dis isposed o , convert	n this fo splays a of, or Be tible secu	orm are a curre eneficial urities)	e not req ntly valid	uired to re d OMB cor	spond unle strol numbe	ess er.	02)
	2.	3. Transactio	Table II -	Derivati (e.g., put)   4  ate, if 7	ive Securiti tts, calls, wa 4. Transaction Code	es Acquir arrants, op 5. Numbe	Pers cont the f ed, Di tions r 6. D and e (Mc	sons wheatined in form dissipposed of converted the Exercitation of the converted to the co	of, or Be cible secucisable on Date	eneficial urities) 7. Ti Amo	e not req ntly valid	uired to re d OMB cor	spond unle atrol number	f 10. Ownersh Form of Derivativ Security: Direct (E or Indire	11. Nature of Indirect Beneficial Ownership (Instr. 4)

#### **Reporting Owners**

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

### **Signatures**

Carmen DeForest, by Power of Attorney	09/01/2005
**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.