# FORM 4

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

| OMB APPROVAL       |           |  |  |  |  |  |
|--------------------|-----------|--|--|--|--|--|
| OMB Number:        | 3235-0287 |  |  |  |  |  |
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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 Typ  | e Response  | s)              |   |  |   |   |                               |   |   |  |  |  |             |  |  |                     |            |
|---|---|-----------------|---|--|---|---|-------------------------------|---|---|--|--|--|-------------|--|--|---------------------|------------|
| Name and Address of Reporting Person * BAUMAN PHILLIP A   |   |                 | 2. Issuer Name and 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) 05/11/2006 |   |                               |   |   |  |  | Officer (give title below) Other (specify below)                                 |             |  |  |                     |            |
| (Street)  |   |                 |   | 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 |  |             |  |  | Line)               |            |
| NEW YORK, NY 10019 (City) (State) (Zip)   |   |                 |   |  |   |   |                               |   |   |  |  |  |             |  |  |                     |            |
|   |   | ()              |   |  |   |   |                               |   |   |  |  | sired, Disposed of, or Beneficially Owned  5. Amount of Securities  6. 7. Nature |             |  |  |                     |            |
| 1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)   |   |                 |   | Code<br>(Instr. 8)                                   |   | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |                               |   | Beneficially Owned Following<br>Reported Transaction(s) |  |  | Ownership of Form:   |             | Indirect<br>neficial                           |  |                     |            |
|   |   |                 |   | (Month/  | Day/Year]   | Co  | de                            | V   | Amoun   | (A) or (D)   | Price  | (Instr. 3 and 4)   |             | \ /  |  | vnership<br>str. 4) |            |
| Common S  | Stock   |                 | 05/11/2006  |  |   | F   | )                             |   | 610   | A  | \$<br>11.53  | 19,393   |             | D  |  |                     |            |
| Common S  | Stock   |                 |   |  |   |   |                               |   |   |  |  | 5,637  |             |  | I  | Spe                 | ouse       |
| Common S  | Stock   |                 |   |  |   |   |                               |   |   |  |  | 100  |             |  | I  | Da                  | ughter     |
| Common Stock  |   |                 |   |  |   |   |                               | 100   |   |  | I  | Da   | ughter      |  |  |                     |            |
| Common S  | Stock   |                 |   |  |   |   |                               |   |   |  |  | 100  |             |  | I  | Da                  | ughter     |
| Reminder: R indirectly.   | Report on a   | separate line f | for each class of seco  | urities bei  | neficially  | owned   | ı                             | Pers  | ons wh  |  |  |  |             | formation                                      |  | SEC 1               | 1474 (9-   |
| contained in this form are not required to respond unless 02) the form displays a currently valid OMB control number. |   |                 |   |  |   |   |                               | 02)   |   |  |  |  |             |  |  |                     |            |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned  (e.g., puts, calls, warrants, options, convertible securities) |                 |   |  |   |   |                               |   |   |  |  |  |             |  |  |                     |            |
| 1. Title of 2   | 2.  | 3. Transactio   | ,   | U / I  | , cans, wa  |   |                               |   |   |  |  | itle and   | 8. Price of | 9. Number                                      | of 10.   |                     | 11. Nature |
| Derivative<br>Security<br>(Instr. 3)  | Conversion  |                 | Execution Da  | ate, if Tr   | ode   | of  | ative ities ired resed ) . 3, | and Expiration Date (Month/Day/Year) Am Und |   | nount of derlying surities str. 3 and Control of derlying str. 3 and Control of the str. 3 and C |  |  |             | rship<br>of<br>ative<br>ity:<br>t (D)<br>irect | of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                     |            |
|   |   |                 |   | C  | Code V  | (A)   | (D)                           | Date<br>Exe                                 | e<br>rcisable   | Expirat<br>Date  | ion Titl   | Amount<br>or<br>Number<br>of<br>Shares   |             |  |  |                     |            |

#### **Reporting Owners**

| Donouting Owner Name / Address   | Relationships |           |         |       |  |  |  |
|--|---------------|-----------|---------|-------|--|--|--|
| Reporting Owner Name / Address   | Director      | 10% Owner | Officer | Other |  |  |  |
| BAUMAN PHILLIP A<br>111 WEST 57TH STREET<br>SUITE 1100<br>NEW YORK, NY 10019 | X             |           |         |       |  |  |  |

#### **Signatures**

| /s/ Jackie Matthews, by Power of Attorney | 05/11/2006 |
|---|------------|
| **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.

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