FORM 3

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL OMB 3235-Number: 0104 Estimated average burden hours per 0.5 response...

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 Type Responses) | | | | | | | | |
|--|---|--|--------|--|--|---|---|--|
| Name and Address of Reporting Person * Matrick Sandra A | Statemen (Month/ | 2. Date of Event Requiring Statement (Month/Day/Year) 08/01/2004 | | | 3. Issuer Name and Ticker or Trading Symbol HARRIS & HARRIS GROUP INC /NY/ [TINY] | | | |
| (Last) (First) (Middle) 111 WEST 57TH STREET, SUITE 1100 | | J8/01/200 4 | | Person(s) to Is | p of Reporting ssuer all applicable) | Filed(M | 5. If Amendment, Date Original Filed(Month/Day/Year) | |
| NEW YORK, NY 10019 | | | | X_ Officer (given title below) | | 6. Indiv Filing(C _X_Form | Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | |
| (City) (State) (Zi | p) | Table I - Non-Derivative Securities Beneficially Owned | | | | | | |
| | o respond to | Ben (Ins | tr. 4) | lly Owned neficially owned d n of information | Ownership Form: Direct (D) or Indirect (I) (Instr. 5) irectly or indir contained in | Ownership (Instr. 5) ectly. h this form a | | |
| not required to respond unless the form displays a currently valid OMB control number. | | | | | | | | |
| Table II - Derivative S | Socurities Rona | ficially O | wnad | (a a nute calle y | varrante anti | ons convertib | ala sacuritias) | |
| 1. Title of Derivative Security (Instr. 4) | 2. Date Exerciand Expiration (Month/Day/Year) | ate Exercisable Expiration Date th/Day/Year) | | tle and Amount of rities Underlying vative Security :. 4) | 4. Conversior or Exercise Price of Derivative | 5. Ownership Form of Derivative | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | |
| | Date Exercisable D | Expiration Date | Title | Amount or Numb of Shares | Security | Security: Direct (D) or Indirect (I) (Instr. 5) | | |
| Reporting Owners | | | | | | | | |

| Reporting Owner Name / Address | Relationships | | | | |
|--|---------------|-----------|-----------------------|-------|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | |
| Matrick Sandra A 111 WEST 57TH STREET SUITE 1100 NEW YORK, NY 10019 | | | General Counsel & CCO | | |

Signatures

| Jackie Matthews by Power of Attorney | 08/11/2004 |
|--------------------------------------|------------|
| **Signature of Reporting Person | Date |

Explanation of Responses:

No securities are beneficially owned

- * If the form is filed by more than one reporting person, see Instruction 5(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.