FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF 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

Name and Address of Reporting Person* LAIRD NEIL J	2. Date of Event Requiring Statement (Month/Day/Year) 06/21/2024	3. Issuer Name and Ticker or Trading Symbol Ondas Holdings Inc. [ONDS]				
(Last) (First) (Middle)		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) 5. If Amendment, Date of Original Filed (Month/Day/Year)				
53 BRIGHAM STREET, UNIT 4		Director 10% Owner Officer (give title below) Other (specify below) Other (specify below) Applicable Line) X Form filed by One Reporting Person				
(Street) MARLBOROUGH MA 01752		CFO, Secretary and Treasurer Form filed by More than One Reporting Person				
(City) (State) (Zip)						

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	
Common Stock	250	D	
Common Stock	769	I	By Spouse
Common Stock	4,400	I	By Spouse in IRA

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

, ,	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Un Derivative Security (Instr. 4)	nderlying	or Exercise	Form: Direct (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)
				Amount or	Price of Derivative Security	Indirect (I) (Instr. 5)	
1 1	Date Exercisable	Expiration Date	Title	Number of Shares	occurry,		

Explanation of Responses:

/s/ Neil Laird

06/24/2024

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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

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

^{*} 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).