| SEC | Form | 4 |
|-----|------|---|
|-----|------|---|

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule

| STATEMENT OF CHANGES IN BENEFICIAL OWNERSH |
|--|
|--|

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

| 10b5-1(c). See Instruction 10. | | | | | | | |
|---|----------------|---|---|--|--|--|--|
| 1. Name and Address of Reporting Person * LAIRD NEIL J (Last) (First) (Middle) 53 BRIGHAM STREET, UNIT 4 | | 2. Issuer Name and Ticker or Trading Symbol <u>Ondas Holdings Inc.</u> [ONDS] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | |
| | | 3. Date of Earliest Transaction (Month/Day/Year) 06/21/2024 | X Officer (give title Other (specify below) below) CFO, Secretary and Treasurer | | | | |
| (Street) MARLBOROUGH MA (City) (State) | 01752 (Zip) | 4. If Amendment, Date of 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 | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Transaction Code (Instr. | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
|---------------------------------|--|---|-----------------------------|---|--|---------------|-------|--|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock | | | | | | | | 250 | D | |
| Common Stock | | | | | | | | 769 | Ι | By Spouse |
| Common Stock | | | | | | | | 4,400 | I | By Spouse in IRA |

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

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transac Code (In 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported | Form: Direct (D) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---|---|--|---|---------------------------------|---|--|-----|--|--------------------|--|-------------------------------------|---|--|---------------------|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | Transaction(s) (Instr. 4) | | |
| Warrants (right to buy) | \$0.66 | 06/21/2024 | | A ⁽¹⁾ | | 45,455 | | 06/21/2024 | 06/21/2029 | Common Stock | 45,455 | \$ <mark>0</mark> | 45,455 | D | |

Explanation of Responses:

1. In connection with the reporting person's service as CFO, Secretary and Treasurer, the issuer granted the reporting person warrants to purchase 45,455 shares of common stock, which vest on a quarterly basis over 12 months.

/s/ Neil Laird

** Signature of Reporting Person

<u>06/24/2024</u> Date

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

 * 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.

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.