FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number: 3235-0									
	Estimated average burden									
- 1	hours nor roomanas:	0.5								

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

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. Name and Address of Reporting Person*  Shah Mihir  (Last) (First) (Middle)  C/O THE ONCOLOGY INSTITUTE INC.					3. E	Issuer Name and Ticker or Trading Symbol     Oncology Institute, Inc. [ TOI ]      Jate of Earliest Transaction (Month/Day/Year)     11/17/2022								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below)  Chief Financial Officer					
(Street) CERRITOS CA 90703 (City) (State) (Zip)							4. If Amendment, Date of Original Filed (Month/Day/Year)							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-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				action	2A. Deemed Execution Date,			3. 4. Transaction Di Code (Instr. 5)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			5. Amou Securiti Benefic	nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock 11/17,					7/2022	7/2022		Code	v	Amount 18,60	(A) or (D)	Price	Transac (Instr. 3	tion(s)		D	(IIISU: 4)		
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 I if any (Month/Day	Date, 1	4. Transac Code (I 8)		of		6. Date Exercisa Expiration Date (Month/Day/Year			7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	Amount or Number of Shares						
Non- Qualified Stock Option (right to buy)	\$1.87	11/17/2022			A		94,418		(2)	1	1/17/2032	Common Stock	94,418	\$0.0	94,418	3	D		

## **Explanation of Responses:**

- 1. Represents RSUs with 1/4th of the RSUs vesting on the anniversary of November 17, 2022 (the Vesting Commencement Date), with the remaining RSUs vesting in three equal annual installments beginning on the first anniversary of the Vesting Commencement Date, with all RSUs becoming vested on the fourth anniversary of the Vesting Commencement Date, subject to continued service with the Company through such vesting dates.
- 2. The stock options vest as to 1/4th of the options granted on the first anniversary of the Vesting Commencement Date, with the remaining options vesting in four equal annual installments beginning on the first anniversary of the Vesting Commencement Date, with all options becoming vested on the fourth anniversary of the Vesting Commencement Date, subject to continued service with the Company through such vesting dates.

By: Mark Hueppelsheuser For: Mihir Shah

11/21/2022

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.