FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C.	20549
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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).

1. Name and Address of Reporting Person\*

TOI HC I, LLC

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

7. Nature of Indirect Beneficial Ownership (Instr. 4)

See footnote(4)

See footnote(4)

See footnote(4)

11. Nature of Indirect Beneficial Ownership (Instr. 4)

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1. Name and Address of Reporting Person*  Havencrest Healthcare Partners, L.P.  (Last) (First) (Middle)  2100 MCKINNEY AVE, SUITE 1760			2. Issuer Name <b>and</b> Ticker or Trading Symbol Oncology Institute, Inc. [ TOI ]										Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner							
				3. Date of Earliest Transaction (Month/Day/Year) 08/24/2022										Officer (give title Other (specify below) below)						
(Street) DALLA (City)	DALLAS TX 75201			4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line)     Form filed by One Reporting Person     Y     Form filed by More than One Reporting Person						
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1. Title of	Security (Ins		: 1 - NC	2. Transacti Date (Month/Day	on	2A Ex	. Dec	emed ion Day/	ate,	3. Transa Code ( 8)	ction	4. Securities Disposed O	Acqui	red (A) oı		5. Amou Securitie Benefici Owned I	nt of es ally Following	Form (D) o	nership : Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership
										Code	v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common	ommon stock			08/24/20	022					S		21,084	D	\$6.3	<b>7</b> <sup>(1)</sup>	15,49	7,237		I	See footnote(
Common stock			08/25/20	2022				S		3,525	D	\$6.2	(2)	2) 15,493,712		1 1		See footnote(		
Common	stock			08/26/20	022					S		40,000	D	\$6.0	3(3)	15,45	53,712		Ι	See footnote(
		Та	ble II									oosed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)  2. Conversior or Exercise Price of Derivative Security		Date Ex (Month/Day/Year) if		eemed tion Date, h/Day/Year)	4. Transactio Code (Instr 8)					Expiration D (Month/Day)		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se (Ir	Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownersh Form: Direct (D) or Indirec (I) (Instr.	Benefic Owners t (Instr. 4
					Code	v		(A)	(D)	Date Exerci	isable	Expiration Date	Title	Amount or Number of Shares						
		Reporting Person		<u>.P.</u>																
(Last) 2100 MC		(First) AVE, SUITE 17	,	liddle)																
(Street)  DALLA	S	TX	75	5201																
(City)		(State)	(Zi	p)																
		Reporting Person thcare Partne		P, LLC																
(Last) 2100 MC		(First) AVE, SUITE 17		liddle)																
(Street) DALLA	S	TX	75	5201																
(City)		(State)	(Zi	ip)																

(Last) 2100 MCKINN	(First) NEY AVE, SUITE	(Middle) 1760	
(Street) DALLAS	TX	75201	
(City)	(State)	(Zip)	

## **Explanation of Responses:**

- 1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$6.25 to \$6.68, inclusive. The reporting person undertakes to provide The Oncology Institute, Inc., any security holder of The Oncology Institute, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (1) to this Form 4.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$6.00 to \$6.40, inclusive. The reporting person undertakes to provide The Oncology Institute, Inc., any security holder of The Oncology Institute, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (2) to this Form 4.
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$5.85 to \$6.27, inclusive. The reporting person undertakes to provide The Oncology Institute, Inc., any security holder of The Oncology Institute, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (3) to this Form 4.
- 4. TOI HC I, LLC is the record holder of these shares. Havencrest Healthcare Partners, L.P. may be deemed to have beneficial ownership of the shares directly held by TOI HC I, LLC. Havencrest Healthcare Partners GP, LLC controls Havencrest Healthcare Partners, L.P. Each reporting person disclaims beneficial ownership of the reported securities except to the extent of such reporting person's pecuniary interest therein.

## Remarks:

/s/ Havencrest Healthcare
Partners, L.P., by Kyle Seco,
as attorney-in-fact
/s/ Havencrest Healthcare
Partners GP, LLC, by Kyle
Seco, as attorney-in-fact
/s/ TOI HC I, LLC, by Kyle
Seco, as attorney-in-fact
\*\* Signature of Reporting Person

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.