SEC Form 4	
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(City)

(State)

(Zip)

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
	3235-0267							

to Sec obligat	this box if no l tion 16. Form 4 tions may conti tion 1(b).	or Form 5	STA		l pursu	ant t	to Se	ction 16(a	a) of the	Secur	ities Exchang	je Act of			SHIP	E		nber: average bu response:	3235-0 rden	0.5		
1. Name and Address of Reporting Person [*] Havencrest Healthcare Partners, L.P.				2. Is:	or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol <u>Oncology Institute, Inc.</u> [TOI]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)									
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 01/24/2024								Director X 10% Owner Officer (give title Other (specify below) below)								
2100 MCKINNEY AVE, SUITE 1760 4.						4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Join Line)											•		able			
(Street) DALLA	(Street) DALLAS TX 75201						Form filed by One Reporting Person X Form filed by More than One Reporting Person															
(City) (State) (Zip)			Ru	Rule 10b5-1(c) Transaction Indication																		
						Cheo satis	ck this fy the	s box to in affirmativ	dicate that e defense	at a trai e condi	nsaction was m tions of Rule 1	nade purs 0b5-1(c).	suant to See Ir	o a cor nstruct	ntract, instru ion 10.	uction or v	written p	olan that is in	tended t	:0		
			I - No						<u>.</u>	d, Di	sposed of	,			<u>,</u>							
1. Title of	Security (Ins	tr. 3)		2. Transact Date (Month/Day		2A. Deemed Execution Date if any (Month/Day/Ye		on Date,			s Acquired (A) f (D) (Instr. 3, 4		4 and Securiti Benefic Owned		es ally Following	Forr (D) c	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	(A) or (D) Prid		e	Reported Transaction(s) (Instr. 3 and 4)				·	•,		
Common	stock			01/24/2	024				S		24,915	D	\$2	.3(1)	27,498		I		See footnote ⁽⁴⁾			
Common	stock			01/25/2	2024				S		11,882	D	\$2.	.07(2)	15,616			Ι	See footnote ⁽⁴⁾			
Common	stock			01/26/2)24		S		6,979	D	D \$2.14		8,637		Ι		See footnote ⁽⁴⁾					
Common	stock														8,801,823		Ι		See footnote ⁽⁵⁾			
		Ta	ble II								oosed of, convertib				Ownee	d						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu if any	eemed ition Date, h/Day/Year)	4. Transa Code 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		ion of str. Derivative Securities Acquired (A) or Disposed of (D)		Expiration Date		Date	7. Title and Amount of Securities Underlying Derivative Security (Ir 3 and 4)		D S (I	. Price of Perivative Security nstr. 5)	9. Num derivati Securit Benefic Owned Followi Reporte Transac (Instr. 4	ive ies :ially ng ed ction(s)	10. Ownersh Form: Direct (Dj or Indirec (I) (Instr.	ip of Ir Ben Owi t (Ins	Nature ndirect neficial nership ntr. 4)
					Code	V		(A) (D)	Date	isable	Expiration Date		Amou or Numb of Share	er								
		I Reporting Person [*] Ithcare Partne		<u>.P.</u>	ooue						Duto			<u> </u>		L		1				
(Last) 2100 MC	CKINNEY	(First) AVE, SUITE 17		liddle)																		
(Street) DALLA	S	ТХ	75	5201		_																
(City)		(State)	(Z	ip)																		
		FReporting Person [*]		<u>P, LLC</u>																		
(Last) 2100 MC	CKINNEY	(First) AVE, SUITE 17		liddle)																		
(Street) DALLA	¢.	TX	74	5201		_																

1. Name and Address of Reporting Person [*] TOI HC I, LLC								
(Last) (First) (Middle) 2100 MCKINNEY AVE, SUITE 1760								
(Street) DALLAS	ТХ	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 \$2.15 to \$2.44, inclusive. The reporting person undertakes to provide The Oncology Institute, Inc. (the "Issuer"), any security holder of the Issuer, or the staff of the Securities and Exchange Commission ("SEC"), 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 \$2.01 to \$2.19, inclusive. The reporting person undertakes to provide the Issuer, any security holder of the Issuer, or the staff of the SEC, 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 \$2.09 to \$2.19, inclusive. The reporting person undertakes to provide the Issuer, any security holder of the Issuer, or the staff of the SEC, 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. Havencrest Healthcare Partners GP, LLC (the "General Partner") is the record holder of these shares of the Issuer's common stock.

5. TOI HC I, LLC is the record holder of these 8,801,823 shares of the Issuer's common stock. Havencrest Healthcare Partners, L.P. may be deemed to have beneficial ownership of the shares directly held by TOI HC I, LLC. The General Partner controls Havencrest Healthcare Partners, L.P.

Remarks:

Each reporting person disclaims beneficial ownership of the reported securities except to the extent of such reporting person's pecuniary interest therein.

/s/ Havencrest Healthcare Partners, L.P., by Matthew Shofner, Vice President, 01/26/2024 Secretary and Treasurer of the **General Partner** /s/ Havencrest Healthcare Partners GP, LLC, by Matthew Shofner, Vice 01/26/2024 President, Secretary and Treasurer /s/ TOI HC I, LLC, by 01/26/2024 Matthew Shofner, Manager Date

** Signature of Reporting Person

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.