FORM 4

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

Washington,	D.C. 20549	

STATEMENT OF	CHANGES	IN RENEFICIAL	

OMB APP	ROVAL								
OMB Number:	3235-0287								
Estimated average burden									
hours per response	. 05								

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

Name and Address of Reporting Person*     O'Meara Maeve					2. Issuer Name and Ticker or Trading Symbol Oncology Institute, Inc. [ TOI ]							eck all app	tor	ng Per	10% Ov	vner				
(Last)	(Fi	st) (M	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 12/26/2023							Office	er (give title		Other (s below)	specify				
C/O THI	E ONCOLO	GY INSTITUT	E INC.		4. If A	Amend	ment,	Date o	f Origina	al Filed	d (Month/Da	y/Year	r)		6. Individual or Joint/Group Filing (Check Applicable					
18000 S	ΓUDEBAK	ER RD, SUITE	800									Line)  X Form filed by One Reporting Person								
(Street)	OS CA	. 9	0703													filed by Mo		Ü		
					Rul	Rule 10b5-1(c) Transaction Indication														
(City)	(St	ate) (2	Zip)		Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Inst															
		Table	I - Non	-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or I	Bene	ficia	Illy Own	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da			Execution Da		Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (ADisposed Of (D) (Instr. 3			Securit Benefic Owned	5. Amount of Securities Beneficially Owned Following Reported		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership					
							Code	v	Amount	(A)	) or )	Price	Transa	action(s) 3 and 4)			(Instr. 4)			
Common	stock			12/26/	/2023				A	A		0 A		<b>\$0</b> (1	109,104			D		
	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. Deen Executio if any (Month/E		4. Transaction Code (Instr. 8) Securitie Acquired (A) or Disposec of (D) (Instr. 3, and 5)		rative rities rired r osed )	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Insti 3 and 4)		nstr.	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly D o (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amo or Num of Shar	ber						

## **Explanation of Responses:**

1. Represents restricted stock units that vest in full on TOI, Inc. 2024 annual shareholder meeting date, subject to continued service with the Company through such vesting date.

## Remarks:

/s/ Mark Hueppelsheuser, Attorney-in-Fact for Maeve O'Meara

12/28/2023

\*\* 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.