FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

STATEMENT	OF CHAN	IGES IN B	ENEFICIAL	OWNERSHIP

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).

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

								00											
1. Name and Address of Reporting Person* Shah Mihir						2. Issuer Name and Ticker or Trading Symbol Oncology Institute, Inc. [TOI]								k all application	able)	g Pers	on(s) to Issu	ner	
(Last)	,	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/21/2024							X	below)	give title nief Fina	ncial	Other (s below) Officer	pecity	
C/O THE ONCOLOGY INSTITUTE INC. 18000 STUDEBAKER RD, SUITE 800						4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)	os c	A	90703									X	Form filed by One Reporting Person Form filed by More than One Reporting Person						
Rule 10b5-1(c) Transaction Indication																			
						Che the	ck this box affirmative o	to indid defense	cate that a t e conditions	ransa s of Ru	ction was mule 10b5-1(d	nade pursu c). See Inst	ant to a ruction 1	contract 10.	, instruction	or written pl	lan that	t is intended to	satisfy
		Та	ble I - Noı	n-Deri	vativ	ve Se	ecuritie	s Ac	quired,	Dis	posed c	of, or B	enefic	ially	Owned				
Date			2. Trans Date (Month		action 2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed C		ties Acquired (A) or I Of (D) (Instr. 3, 4 an		or and 5)	5. Amoun Securities Beneficia Owned For Reported	Form (D) or		: Direct I r Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) (D)	or P	rice	Transacti (Instr. 3 a	ion(s)			Instr. 4)
Common Stock 05					1/202	1/2024 A 151,459 ⁽¹⁾ A		\$0.0	474,931 ⁽²⁾			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)	vative Conversion Date Execution Date, irity or Exercise (Month/Day/Year) if any		ate, T	ransa	ransaction Derivative ode (Instr. Securities		es I (A) sed str.	6. Date Exercisable and Expiration Date (Month/Day/Year) (Month/Day/Year) 7. Title and An of Securities Underlying Derivative Sec (Instr. 3 and 4)			ties ng e Secui	Derivative Security		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				c	Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amo or Num of Sh	ber		(Instr. 4)	ion(s)		
Non- Qualified Stock Option (right to	\$2	05/21/2024			A		378,648		(3)	a	95/21/2034	Commor Stock	378	,648	\$0.0	378,64	48	D	

Explanation of Responses:

- 1. Represents RSUs with 1/4th of the RSUs vesting on the first anniversary of 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. Amount includes a reduction of 4,650 shares from the prior filing, as it corrects an inadvertent overstatement of holdings due to clerical error.
- 3. 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 three equal annual installments beginning on the first anniversary of the Vesting Commencement Date, with the Company through such vesting dates.

By: Mark Hueppelsheuser,

Attorney-in-Fact For: Mihir

Shah

** Signature of Reporting Person

Date

05/23/2024

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.