FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D C	20540
wasiiiigton,	D.C.	20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-02									
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

1. Name and Address of Reporting Person* Podnos Yale (Last) (First) (Middle) C/O THE ONCOLOGY INSTITUTE INC. 18000 STUDEBAKER RD, SUITE 800 (Street) CERRITOS CA 90703					Issuer Name and Ticker or Trading Symbol Oncology Institute, Inc. [TOI] Date of Earliest Transaction (Month/Day/Year) 03/21/2022 4. If Amendment, Date of Original Filed (Month/Day/Year) 03/23/2022								S. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director						
(City)	(3	•	(Zip)	Deriva	ative	Se	curities	 . Δ c	quired		nosed c	of or Be	nefic	cially	, Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				2A. Deemed Execution Date,		3. Transaction Code (Instr.					or	5. Amour Securitie Beneficia Owned F Reported	Amount of ecurities eneficially wned Following		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	mount (A) or (D)		rice	Transaction(s) (Instr. 3 and 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 Da if any (Month/Day/Y	C (ransaction ode (Instr.				6. Date Exercis Expiration Date (Month/Day/Yea		е	7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ow Fo Olly Dir or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Co	ode '	v	(A)	(D)	Date Exercis		Expiration Date	Title	Amo or Num of Shar	nber					
Stock Option (right to buy)	\$7.09	03/21/2022			A		10,984		(1)		03/21/2032	Common	10,9	984	\$0	10,984		D	
Stock Option (right to buy)	\$7.09	03/21/2022			A		64,567		(2)		03/21/2032	Common	64,:	567	\$0	64,567	,	D	

Explanation of Responses:

- 1. The stock options vest in four equal annual installments on each of the first four anniversaries of November 12, 2021 (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.
- 2. The stock options vest as to 1/3rd of the options granted on the second anniversary of the Vesting Commencement Date, with the remaining options vesting in four equal annual installments beginning on the third anniversary of the Vesting Commencement Date, with all options becoming vested on the sixth anniversary of the Vesting Commencement Date, subject to continued service with the Company through such vesting dates

Remarks:

This amendment is filed to correct the number of options granted due to an administrative error in applying the grant amount calculations.

/s/ Mark Hueppelsheuser, Attorney-in-Fact for Yale

03/29/2022

Podnos

** 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.