SEC Form 4	
	Л

## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

Check this box to indicate that a transaction was made pursuant to a

contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is

### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APF	ROVAL
OMB Number:	3235-0287
Estimate de la company	he could be up

Estimated average burden hours per response: 0.5

	sfy the affirmative ons of Rule 10b5- ction 10.								
1	ess of Reporting Pers	son*	2. Issuer Name <b>and</b> Ticker or Trading Symbol Oncology Institute, Inc. [ TOI ]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
McGeorge Anne			Oncology institute, inc. [101]	V	Director	10% Owner			
C/O THE ONCOLOGY INSTITUTE INC.		UTE INC.	3. Date of Earliest Transaction (Month/Day/Year) 11/22/2024		Officer (give title below)	Other (specify below)			
18000 STUDEBAKER RD, SUITE 800		TE 800	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	ividual or Joint/Group Filing (Check Applicable				
(Street)					Form filed by One Repo	orting Person			
CERRITOS	CA	90703			Form filed by More thar Person	n One Reporting			
(City)	(State)	(Zip)							

#### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code ( 8)					5. Amount of Securities Beneficially Owned Following	Form: Direct	7. Nature of Indirect Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common stock	11/22/2024		A		56,000(1)	Α	\$ <mark>0</mark>	183,346	D	

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

			(e.g., pi	113, 56	ans, v	varie	ants,	options, t	,onvertib	16 36	cunities	9		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of I		6. Date Exerc Expiration Da (Month/Day/Y	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

#### Explanation of Responses:

1. Represents restricted stock units that vest in full on TOI, Inc.'s 2025 annual shareholder meeting date, subject to continued service with the Company through such vesting date.

/s/ Mark Hueppelsheuser, Attorney-in-Fact for Anne McGeorge

11/25/2024

\*\* 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.