

Spirit AeroSystems Holdings, Inc. Retirement and Savings Plan

ROLLOVER CONTRIBUTION ELECTION FORM

STEP 1: PLEASE ENTER YOUR PERSONAL INFORMATION HERE PLEASE PRINT CLEARLY

Name [First] [MI] [Last]

Street Address

City State Zip

Date of Birth Date of Hire

Social Security Number

Daytime Telephone Evening Telephone

I hereby elect to make a rollover contribution* to the Spirit AeroSystems Holdings, Inc. Retirement and Savings Plan in the amount of \$

As evidenced by the attached documentation, this amount does not exceed the taxable amount which I received within the last 60 days from an eligible retirement plan, such as a traditional IRA (not a Roth IRA) or a former employer's plan.

*Please note: the amount should be the total amount of your rollover contribution.

Important note regarding the 60-day rollovers: If a portion of the rollover is attributable to a qualified plan loan offset amount, then the deadline for rolling over that loan offset amount is the due date (including extensions) for filing the Federal income tax return for the tax year in which the plan loan offset occurs. A "qualified plan loan offset amount" is the amount by which an employee's account balance under the plan is reduced to repay a loan from the plan, and is treated as distributed from a 401(a)-qualified plan, a 403(b) plan, or a governmental 457(b) plan solely by reason of a) the termination of the plan, or b) failure to meet the repayment terms of the loan because of the employee's separation from service (whether due to layoff, cessation of business, termination of employment, or otherwise).

STEP 2: PLEASE CHOOSE YOUR PLAN INVESTMENTS BELOW

Please select how you would like your Rollover Contribution to be invested. Allocation may be made in 1% increments, and must total 100%. If you would like to review information on the available investment choices, please call the Plan Information Line or visit the Plan's website.

Spirit Stable Value Fund	%	Dodge & Cox International Stock Fund	%
SSgA Passive Bond Market Index Fund	%	SSgA Target Retirement Income Fund	%
Goldman Sachs Bond Institutional Fund	%	SSgA Target Retirement 2020 Fund	%
SSgA US Inflation Protected Bond Index Fund	%	SSgA Target Retirement 2025 Fund	%
SSgA S&P 500 Index Fund	%	SSgA Target Retirement 2030 Fund	%
Vanguard Dividend Growth Fund	%	SSgA Target Retirement 2035 Fund	%
SSgA S&P Mid-Cap 400 Index Fund	%	SSgA Target Retirement 2040 Fund	%
Hartford Mid-Cap Fund	%	SSgA Target Retirement 2045 Fund	%
SSgA Russell 2000 Index Fund	%	SSgA Target Retirement 2050 Fund	%
Voya Small Company Portfolio Class	%	SSgA Target Retirement 2055 Fund	%
Vanguard Total International Stock Index Fund	%	SSgA Target Retirement 2060 Fund	%

TOTAL 100%

Continued on back.

STEP 3: PLEASE READ INSTRUCTIONS AND SIGN BELOW

By signing below,

I certify that a description of each investment alternative offered under the Plan has been made available to me - including a description of the investment objectives, the risk and return characteristics, the type and diversification of the assets of each alternative, and the transaction fees and expenses that will be charged to my account if I purchase or sell interests in each investment. A prospectus for each mutual fund which is an investment under the Plan and a brochure for each investment which is a collective fund have been made available to me. I realize that I will not be able to vote any securities held in my plan account. Decisions about voting securities will be made by my company on behalf of the Plan. I may, upon request, receive the latest information made available to the Plan concerning annual operating expenses of each investment alternative, including investment management fees, administrative fees and transaction costs that reduce the rate of return to participant and beneficiaries; the aggregate amount of annual operating expenses expressed as a percentage of average net assets of each investment alternative; copies of prospectuses and financial statements; and performance information relating to the value of shares or units as well as past and current investment performance, net of expenses, for each alternative.

I have attached the following:

- A copy of the distribution statement from my prior plan demonstrating that the original source of the fund is a qualified retirement plan (or governmental 457(b) plan). For rollovers from a conduit IRA, I have attached the most recent account statement.
- If the rollover contribution is from a former employer's plan, please print the name of your former employer. If the rollover contribution is from a conduit IRA, please print the name of the financial institution that provides your conduit IRA account.
- If you are directly rolling over Roth money, cost basis and the Roth account's start date provided directly from your prior record keeper. Please include a copy of the rollover distribution statement from your former plan PLUS documentation providing the start date and total amount of your Roth contributions.
- A check made payable to "Voya Institutional Trust Company, for the Benefit of (your full name) for the amount of the rollover contribution. No personal checks will be accepted.

I hereby certify that my distribution qualifies as an eligible rollover distribution.

Financial Institution or Retirement Plan Sponsor

I hereby certify that my rollover contribution consists of the following types of money:

Before-Tax After-Tax Roth

Since your previous plan may allow you to roll over multiple types of money, you must identify what types of money are being contributed. Please choose the applicable types of money. If you are uncertain what type of money you will be contributing, contact the institution that generated the check.

NOTE: ROLLOVER CONTRIBUTIONS WILL BE PROCESSED AFTER THIS FORM, A CHECK AND THE PROPER DOCUMENTATION HAVE BEEN RECEIVED AND APPROVED. REMEMBER TO MAKE A COPY OF THE COMPLETED FORM FOR YOUR RECORDS.

Under the penalties of perjury, I certify that the number shown on this form is my correct Social Security Number or Taxpayer Identification Number.

Signature

Date

Forward this completed form with your check and required documentation to:

Regular Mail
Spirit AeroSystems Holdings, Inc. Retirement and Savings Plan Administration
PO Box 990071
Hartford, CT 06199

Overnight Mail
Spirit AeroSystems Holdings, Inc. Retirement and Savings Plan Administration
One Orange Way
Windsor, CT 06095